WVHS CHOIR PARENTS ASSOCIATION SCHOLARSHIP APPLICATION 2018

1. Complete Application
2. In a minimum of 300/ maximum of 500 words, respond to the essay prompt. Essays should be typed, double-spaced and grammatically correct. They are being scored according to how well the question was answered.
3. A Parent or guardian must sign and date the application.
4. Return application and essay to a WVHS Choir Director by May 4, 2018 at 3:00 p.m.

WHAT CURRICULAR OR EXTRACURRICULAR CHOIR PERFORMANCE HAS BEEN YOUR FAVORITE THIS YEAR, AND WHY? (DESCRIBE EITHER THE FAVORITE PIECE OR THE ACTUAL PERFORMANCE. BE SPECIFIC AND DETAIL ORIENTED)

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YEAR IN SCHOOL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PARENT EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please circle all choral activities participated in this year. Include curricular and extracurricular groups, contests and festivals. List current curricular choir\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Mosaic. Showchoir. Pink Notes. Cloud Nine. UnaVoce. ILMEA. All State Choir. Solo/Ensemble. Musical. Other \_\_\_\_\_\_\_\_\_\_\_\_\_

Scholarship funds may be used for private voice lessons or music camps. Scholarship funds will be sent on students’ behalf to: (choose one)

\_\_\_Show Choir Camps of America in Illinois or Ohio. Circle which camp location student is attending. Scholarship check will be mailed to SCA for you.

\_\_\_Private Voice lessons. Scholarship check made payable to teacher or studio will be given to student before end of school year. Please list teacher or studio name and address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_Rising Stars Showchoir Camp

\_\_\_Other. Please describe in detail and give name and address for processing.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To the best of my knowledge, the information contained herein is true and accurate.

STUDENT SIGNATURE/DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT SIGNATURE/DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have questions regarding the completion of the application or the scholarship process contact CPA Scholarship Committee Chairpersons Tina Rose at 630-336-1238 or Kristina Born at 630-388-8464.