

**MOUNT VERNON MUSIC – BETTY WHITLOCK SCHOLARSHIP**  
**APPLICATION FORM**

**Student Information**

Name \_\_\_\_\_

Mailing address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Contact Phone \_\_\_\_\_ Email \_\_\_\_\_

School \_\_\_\_\_ City \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Instrument \_\_\_\_\_ Years of Music Study \_\_\_\_\_

Current Music Affiliations (band, choir, student affiliate, youth strings, other instrument, etc.):

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

Future Goals, Career Dreams: \_\_\_\_\_

How will you use the scholarship funds? \_\_\_\_\_

If selected to perform at an MVM concert, the piece you intend to perform is:

\_\_\_\_\_ (include mvmt or opus #)

Composer \_\_\_\_\_ Approximate length of piece \_\_\_\_\_

Accompanist Name \_\_\_\_\_

How did you hear about this scholarship award? \_\_\_\_\_

**Parent Information**

Parent's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact phone number \_\_\_\_\_ Email \_\_\_\_\_

**Music Teacher Information** (Teacher should not be related to the applicant.)

Private Music Teacher Name \_\_\_\_\_

Music Teacher Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**Parent/Guardian signature** (if student is under 18) \_\_\_\_\_

**Student signature**

**I have read the instructions for completing this application, and I certify that I am eligible and qualified to apply for this scholarship.**

**I understand that in order to receive my scholarship award I will perform at an MVM event. (Concert dates are April 18, May 31 and June 8, 2020.)**

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