

**THE ASHEVILLE COMMUNITY BAND**  
**INSTRUMENTAL MUSIC EDUCATION SCHOLARSHIPS**  
**2nd through 4th Year College Application**

**The Patricia L. Garren Music Education Scholarship**  
**The Asheville Community Band Music Education Scholarship**

**THE ASHEVILLE COMMUNITY BAND  
INSTRUMENTAL MUSIC EDUCATION SCHOLARSHIP APPLICATION  
2nd through 4th Year College Student Application**

The Asheville Community Band Scholarship Foundation is designed to provide financial help to students pursuing a college degree in instrumental music education. All scholarship funds awarded will be deposited at the school of the recipient's choice, and the awards will be announced each year at the spring concert of the Asheville Community Band.

**Eligibility Requirements**

1. Applicant must be an active registered member of a Collegiate concert band program.
2. Applicant must have a 93 or higher grade average in band.
3. Applicant must have enrolled to be a full-time college student.
4. College transcripts must be provided with application.
5. Applicant must complete and return the information requested on the application forms postmarked no later than February 15, 2012 to:

Asheville Community Band  
Attn: College Scholarship Committee  
PO Box 17782  
Asheville, NC 28816

**Application**

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Age: \_\_\_\_\_ e-mail address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone : \_\_\_\_\_

Instrument: \_\_\_\_\_

Years in Band: \_\_\_\_\_

Name of High School Attended: \_\_\_\_\_ Dates Attended: \_\_\_\_\_

Colleges attended \_\_\_\_\_

Dates Attended: \_\_\_\_\_

College to attend or plan to attend: \_\_\_\_\_

(Supporting documentation proving acceptance into the music school at this institution should be included or mailed once applicant receives it.)

**Family Information**

1. Name of Father or Guardian: \_\_\_\_\_
2. Father's Occupation: \_\_\_\_\_  
Job Title Name of Firm
3. Name of Mother or Guardian: \_\_\_\_\_
4. Mother's Occupation: \_\_\_\_\_  
Job Title Name of Firm
5. How many persons are dependent on your parents? \_\_\_\_\_
6. How many brothers and/or sisters will be in college next year? \_\_\_\_\_

**Background Information**

1. What is your Primary Instrument? \_\_\_\_\_
2. What is your Secondary Instrument? \_\_\_\_\_
3. How many years have you been studying your instrument? \_\_\_\_\_
5. What are the leadership positions that you have held? \_\_\_\_\_  
\_\_\_\_\_
6. What are your music affiliations? \_\_\_\_\_
7. What are the previous awards or prizes you have won? \_\_\_\_\_
8. Do you now, or have you ever taken private instruction on your instrument? \_\_\_\_\_  
If yes, how long? \_\_\_\_\_
9. Are you currently in any ensembles? Please list:  
\_\_\_\_\_  
\_\_\_\_\_
10. List other scholarships for which you have either applied or received \_\_\_\_\_  
\_\_\_\_\_

11. List three persons that will recommend you for this scholarship (one must be a band Director) and include contact information.

- a: \_\_\_\_\_
- b: \_\_\_\_\_
- c: \_\_\_\_\_

12. The Scholarship Committee would like a one page essay attached to your application which answers the following question:

Who or what series of events, influenced your decision to become a music educator and what do you perceive will be the most difficult aspect of this career choice for you (apart from financial aid)?

**THE ASHEVILLE COMMUNITY BAND - Application for Financial Scholarship  
DEPARTMENT CHAIR'S ASSESSMENT**

\*Use the reverse side of this sheet to expand any answers. Please include the question number.

Student's Name: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

1. How long have you known the student? \_\_\_\_\_ What Instrument? \_\_\_\_\_

In what capacity? (circle one)    **BAND**    **PRIVATE**    **OTHER** \_\_\_\_\_ (explain)

2. Based on your knowledge, what is the student's level of participation and commitment to Band and/or other musical groups?

\_\_\_\_\_

3. Has this student made satisfactory progress in your program? \_\_\_\_\_

Explain: \_\_\_\_\_

\_\_\_\_\_

4. What is your assessment of this student's musical ability (circle one)?

Well above average    Above Average    Average    Below Average

5. What is this student's greatest musical strength? \_\_\_\_\_

\_\_\_\_\_

6. What is your assessment of this student's potential teaching ability? \_\_\_\_\_

\_\_\_\_\_

7. Based on your observation, is there evidence of need for financial aid? \_\_\_\_\_

Explain: \_\_\_\_\_

8. Please add any comments that might help us better assess this student: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and Title (please print): \_\_\_\_\_ Date: \_\_\_\_\_

Chair's Signature: \_\_\_\_\_ E-mail or Phone: \_\_\_\_\_

*We appreciate the time you have taken to complete this form.*