



## CAROL HOMME MEMORIAL SCHOLARSHIP 2019 APPLICATION

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_ GPA \_\_\_\_\_

Have you studied voice privately? YES \_\_\_ NO \_\_\_ If yes, how long and with whom?

\_\_\_\_\_

Length of time \_\_\_\_\_ Instructor \_\_\_\_\_

*You may use separate sheets to complete the two questions below, as well as for any additional information.*

- **Tell us about your music participation in high school** (e.g. ensembles, musical performances, solo experiences, etc.).

- **What do you want to do in music at the collegiate level?**

Music Major \_\_\_\_\_ Music Minor \_\_\_\_\_ Non-major \_\_\_\_\_ Explain:

Mail this form along with two sealed reference letters to: Carol Homme Scholarship Committee, Cannon Beach Chorus, P.O. Box 1310, Cannon Beach, OR 97110

**Application Due Date: Monday, April 15, 2019**

**Audition/Interview Date: Monday, April 22, 2019**