

Mount Saint Joseph Academy
INSTRUMENTAL SCHOLARSHIP AUDITION APPLICATION
2018

Applicant's Name _____

Name of Parents/Guardians _____

Address _____

Home Phone _____

Applicant Email _____

Mother Email _____

Father Email _____

School Presently Attending _____

INSTRUMENT(S) PLAYED: _____

PLEASE LIST INSTRUMENT TEACHERS WITH WHOM YOU HAVE STUDIED:

PLEASE LIST YOUR MUSICAL PERFORMANCE EXPERIENCES (SHOWS,
RECITALS, COMPETITIONS):

DO YOU HAVE ANY OTHER INTERESTS YOU WISH TO MENTION?

Number of years you have studied with your current teacher: _____

Number of years in private study: _____