CBMC College Scholarship Application DEADLINE! Application a YouTube video link must be RECEIVED by March 29, 2024 by 5 pm Upload video to YouTube & email link to <u>choctawbaymusic@gmail.com</u> or mail to below address\*\*

Applicant's Name:		Date of Birth:	Age:
Street Address:	City:		Zip:
E-mail:	Home Phone: ( )	Cell: (	)
High School attended:		Instrument:	
Teacher:	Total # years of lessons:	# years with prese	ent teacher:
Teacher email:	Work Phone ( )	Cell:	
Teacher's Signature:			/
acknowledging that applicant ha	s been their student for at least 6 months	:	
Parent's or Guardian's Name:		email:	
Home Phone:	Cell:		
<ul> <li>Include title (Opus, Mvt.), comp guage give the English translat</li> <li>Choose pieces from 3 of the 4</li> <li>Video Record performance with choctawbaymusic@gmail.c</li> </ul>	<b>formed on the audition record</b> poser (full name), and length of time for the p tion. If it is from an Opera give the name of t musical periods (Baroque, Classical, Roman h <b>LIVE accompaniment:</b> upload video to toom by 5pm March 29, 2024	performance. If the title he Opera. htic or Contemporary).	Ū
2.			
3			

List music activities, performances, awards received through music organizations (ie: Festival, Guild, Contests)

List music activities and awards received in the community or your church:

Name of college you plan to	attend:		
Address:			
City:	State:	Zip:	

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 We prefer that you Email this application and your YouTube Video link to <u>choctawbaymusic@gmail.com</u> and in your email's subject line type: College Scholarship App from "your name and address" or mail application to:

\*\* Sharleen Williams
 CBMC College Scholarship Application
 558 E. Timberlake Drive
 Mary Esther, FL 32569-2272