

Date of Application: \_\_\_\_\_

[Revised 11/08/2002]

For School Year: \_\_\_\_\_

Scholarship Amount: \_\_\_\_\_

## COLLEGIATE APPLICATION FORM

### Elnora Hartman Stickley Scholarship Fund

#### INSTRUCTIONS

Students and parents are to fill out this form completely. If more space is needed, you may attach an additional sheet of paper. The completed form is to be returned to the Trust Department of 1st *Source Bank*, Attn: Melissa Cooper, P.O. Box 1602, South Bend, Indiana 46634-1602. **Applications must be postmarked by the first Friday of January.**

1. Name of Applicant: \_\_\_\_\_  
Last First Middle Initial Date of Birth (Mo./Day/Yr.)

2. Permanent Home Address: \_\_\_\_\_  
Street City State ZIP Phone

3. Parent or Guardian: \_\_\_\_\_

4. Father: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: ( \_\_\_\_\_ )

5. Mother: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: ( \_\_\_\_\_ )

6. Present High School or College Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

7. Where do you intend to study: \_\_\_\_\_ Have you been accepted: \_\_\_\_\_

8. Anticipated Major: \_\_\_\_\_ Anticipated Minor: \_\_\_\_\_

9. What is your primary instrument: \_\_\_\_\_

10. What other instrument(s) do you play: \_\_\_\_\_

11. For what other scholarships have you applied: \_\_\_\_\_

12. What jobs have you held during the last two years?

Employer

Date

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

13. List your school extra-curricular activities, office held, awards, participation in musical activities, etc. (You may use an additional sheet of paper, if necessary):

---

---

---

---

---

---

---

---

14. Enclose the following with this application:

- A. A brief statement, summarizing your accomplishments and your plans for the future.
- B. Two letters of recommendation: One from a teacher or school administrator, and one from an adult within the community who is not related.
- C. The "Music Teacher Recommendation" form, completed by your private music teacher.
- D. A Repertoire List.
- E. An official transcript of your complete high school record, to date or recent college transcript.
- F. Results of college entrance exams such as PSAT and SAT.

NOTE: A photograph will be required of all award recipients for publicity purposes.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Applicants selected for auditions will be notified at least three weeks prior to the audition date. An accompanist or recorded accompaniment may be used during the audition.

**APPLICATION DEADLINE IS THE FIRST FRIDAY OF JANUARY**

=====

**TEACHER RECOMMENDATION FORM**

Elnora Hartman Stickley Scholarship Fund

INSTRUCTIONS

This form is to be completed by the applicant's teacher of private music lessons. If applicant is not studying music privately, the applicant's primary teacher of music, such as a school music teacher, should fill out the form. If accompanying a collegiate renewal application, this form should be filled out by: (1) primary instructor within student's field of study, (2) another music instructor. **This form must accompany the applicant's form and be filed at the same time.**

1. Name of Student: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Award Student is Seeking: \_\_\_\_\_

3. Name of Teacher: \_\_\_\_\_ Phone: \_\_\_\_\_

4. Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

5. How long has this student studied with you: \_\_\_\_\_

Instrument taught \_\_\_\_\_

6. What evidence of the pursuit of excellence do you see in this student: \_\_\_\_\_

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

7. Do you recommend the award for this student: \_\_\_\_\_

Give reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Other comments: \_\_\_\_\_

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

Teacher Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_