

Date award is needed: _____

6. Give a brief description of the event:

7. For the last five years, in what continuing education, workshops, clinics, private lessons, etc., have you or your organization participated:

8. Tell what benefit you hope to gain from your requested activity:

9. Tell what benefit the community (school, church, city...) may gain from your requested activity:

10. Detail the anticipated cost of the event or activity.

Signature: _____ Position: _____ Date: _____

IT IS RECOMMENDED THAT APPLICATIONS BE FILED THREE MONTHS BEFORE THE DATE OF THE EVENT

MUSIC TEACHER RECOMMENDATION FORM

Elnora Hartman Stickley Scholarship and Grant 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 this form. If accompanying a collegiate renewal application, this form should be filled out by: (1) primary instructor within student's field of study, (2) department chair or other 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. Email Address: _____

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: _____