

Date of application: \_\_\_\_\_

(Revised 1/20/2024)

Date award is needed: \_\_\_\_\_

Amount requested: \_\_\_\_\_

## NON-COLLEGIATE APPLICATION FORM

### Elnora Hartman Stickley Scholarship Fund

#### INSTRUCTIONS

Please fill out this form completely. If more space is needed, you may attach an additional sheet of paper or you may reformat the form on a computer but the exact numbering sequence must be followed. Email the completed form to Wendy Freeman-Campbell at: FreemanCampbellW@1stsource.com and Abigail Thornburg at: thornburga@1stsource.com

It is recommended that applications should be submitted **three months before the award is needed**. They must be received no later than **ONE MONTH** before the Board meeting at which they will be considered: The first Friday of January (for February meeting), the first Friday of April (for May's meeting), the first Friday of July (for August meeting) and the first Friday of October (for November's meeting).

Preference will be given to non-collegiate grants that focus on education, teacher enrichment, performance, educational technology upgrades, and educational outreach for the community. For example, we prefer to award money for tuition, facility use, etc. rather than pay for items such as t-shirts and food. Organizers are encouraged to reach out to multiple sources for funding.

If applicant is a student, the Teacher Recommendation Form must accompany this application.

Please Note - If you receive this award you will be sent an event evaluation form. Completion/return of the event evaluation form is required for future funding consideration

1. Name of Applicant: \_\_\_\_\_  
Last First Middle Initial

Occupation and Position Held or Grade in School: \_\_\_\_\_

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

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

3. Name of event or activity: \_\_\_\_\_

4. Date and Location of event: \_\_\_\_\_

5. Person in Charge of event: \_\_\_\_\_

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 AWARD IS NEEDED**

# MUSIC 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 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: \_\_\_\_\_

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

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

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

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Teacher Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_