Salem Pops Orchestra

2010 SCHOLARSHIP PROGRAM

Applicant's Name_____
Last First MI

Home Address_____City_____

Home Phone_____ Email address_____

Present High School _____

School Address_____

REFERENCES: (One must be a current music teacher and the other a non-family member who knows you well)

1. Name:	2. Name:
Daytime phone:	Daytime phone:
Evening phone:	Evening phone:
Email:	Email:

This applicant's current GPA is _____(0.0-4.0)

Signature and title of school official_____

Printed Name and Title of school official _____

NOTE TO APPLICANT: You are responsible for submitting five (5) completed packets each containing:

1. Application form (this page)
2. Proposed College/University and brief description of educational program and your anticipated musical involvement
3. Your personal music history that includes your teachers' names, courses, lessons, special performances and other honors and accomplishments
4. Two letters of recommendation
5. Unofficial transcript
6. The one page personal essay, "Music in My Life" that tells of the past, present and future roles of music in your life.

Applicant's Signature_____

APPLICATION PACKET MUST BE POSTMARKED BY February 15, 2010. Send all materials to: Education Scholarship, Salem Pops Orchestra, P.O. Box 5794, Salem OR 97304

Applications will be reviewed and the finalists will perform for the Scholarship Committee at Western Oregon University on ***February 27, 2010****.*

QUESTIONS: scholarship@salempopsorchestra.org