

ATWOOD MUSIC & DRAMA CLUB SCHOLARSHIP APPLICATION

PURPOSE: To promote and encourage music and drama students of Rawlins County

QUALIFICATIONS: a. Advanced educational scholarships will be based on merit
b. Scholarships are available to any qualifying Rawlins County high school senior who plans to major or minor in music or drama

APPLICATIONS: a. Application forms are available from Atwood Music and Drama Club Scholarship Committee chairman, music or drama teacher, or high school counselor
b. Application should be returned to the Atwood Music and Drama Club Scholarship Committee Chairman: Gay Dill
c. If arrangements can be made, applicants may be asked to perform for the Atwood Music and Drama Club during the following year.

AWARDS: a. The scholarship Committee may seek recommendations from music or drama teachers.
b. The recipient will be awarded the scholarship certificate at the Awards Assembly in May. All other recipients will be notified of their award by mail.
c. The scholarship money will be sent/mailed to the recipient's college of choice upon proof of enrollment as a Music or Drama Major or Minor.

Deadline: Submit by APRIL 15th **Gay Dill elenagdill@att.net**
814 S 2nd St.
Atwood, KS 67730
785-626-9434

Personal Information

Student's Full Name _____

Student's Address _____

Telephone _____ Grade _____ Age _____

Date of H.S. _____ Number in Class _____ Rank _____

College Choice _____ Intended College Major: _____

Father's Name _____ Mother's Name _____

Areas of Specialty (Answer all that apply)

Vocal _____ Drama _____ Instrument (Name instrument) _____

Do you take private lessons? _____ How many years of study? _____

Please list the following information on an additional page:

1. Music or drama workshops or camps attended
2. Teachers, length of study and dates.
3. Honors and other awards received in the area of music or drama.

Atwood Music & Drama Club SCHOLARSHIP EVALUATION

Evaluation forms must be completed by two of the applicant's teachers...
(Music or Drama teacher, plus another teacher of the student's choice)

Name of Applicant _____

Date of Application _____ **School** _____ **Graduation Date** _____

Your area of instruction _____

How long have you been an instructor of the applicant? _____

In order to be eligible for a scholarship, the student must be planning to major or minor in a music or drama related field in college. Please rate the applicant according to the following numerical scale in each area listed below. Applicants will be considered only if they rate at least a 90 percent of the total possible points.

1-4 Poor 5-6 Average 7-8 Very Good 9-10 Excellent

Natural Ability _____ Performance Ability _____ Creativity _____ Efficiency _____

Initiative _____ Moral Character _____ Sense of Responsibility _____

Leadership _____ Reliability _____ Enthusiasm _____

The scholarship committee will welcome additional comments relative to the applicant, such as reasons you feel the scholarship is deserved by the applicant. (Please use the back of this sheet if you need additional space.)

Teacher's signature _____

Teaching Position _____

School _____

Thank you for helping with this scholarship evaluation.

Atwood Music and Drama Club Scholarship Committee

ATWOOD MUSIC and DRAMA CLUB

APPLICATION

SUMMER MUSIC, DRAMA or BAND CAMP SCHOLARSHIP

Age requirement: 7th to 12th Grade

Application deadline: April 15th

Chairman: Gay Dill

814 South 2nd St.

Atwood, KS 67730

785-626-9434

elenagdill@att.net

Student's Full Name _____

Student's Address _____

Telephone _____ Grade _____ Age _____ Sex _____

Father's Name _____ Mother's Name _____

Name of School _____

Name of Music, Band or Drama Teacher _____

Name of Summer Camp of Choice _____

Areas of Specialty (answer all that apply)

Vocal _____ Choir _____ Drama _____ Instrument (name of instrument) _____

Have you attended a Summer Music, Drama or Band Camp before? _____

If yes, name of camp _____

Teacher's recommendation must accompany the student's application or the application will be invalid.