

Application for The Mamie Hartman Afflerbach Music Scholarships

Date _____

Name _____ Phone _____

Home Address

(City) _____ (State) _____ (Zip) _____

Social Security Number _____ - _____ - _____ E-Mail Address _____

What is your intended major area of study at Kutztown University? _____

What is your intended minor area of study at Kutztown University? _____

Performing area(s) and years of previous private study:

Name of Instrument or Voice Part	Number of Years	Private Teacher's Name
1.		
2.		
3.		

List recent compositions you have studied or can perform:

1. _____

2. _____

3. _____

List any music courses taken in high school:

1. _____

2. _____

3. _____

List music organizations you participated in during high school:

1. _____

2. _____

3. _____

List any awards or honors you received in high school:

1. _____

2. _____

3. _____

List the performing organizations at Kutztown University in which you plan to participate:

1. _____

2. _____

3. _____

Please provide the selection committee with a one-paragraph statement about your career goals and/or future plans.

Please return completed application to:
Dr. Willis M. Rapp, Chair
Department of Music
Kutztown University
Kutztown PA 19530

Recommendation for The Mamie Hartman Afflerbach Music Scholarships

Name of Applicant _____

The above named person has made application for the Mamie Hartman Afflerbach Music Scholarships at Kutztown University. Your recommendation represents one of two such documents that are required of each applicant. Please state the nature of your relationship to the applicant.

For maximum benefit to the applicant, this form should be received by February 1.

Date _____ Signature _____

Position _____

Please return completed recommendation to:

Dr. Willis M. Rapp, Chair
Department of Music
Kutztown University
Kutztown PA 19530