

PO Box 480054, Charlotte NC 28269-5300 Tollfree: 844-509-1422 / Phone: 704-509-1422 / Fax: 866-773-1538 www.AmericanRecorder.org

## Application for Margaret DeMarsh Weekend Workshop Scholarship

Applications are accepted at any time for **weekend workshops** (those of four days or less), at least **two months** before funding is needed. ARS scholarships are for members who primarily play recorder.

Send your application, with the required recommendation letters enclosed, to the address above. Please fill out the information below completely and legibly. You may use the space allotted on this form for the essay or use a separate sheet, but do not exceed one page. Application materials cannot be returned. The application must be signed. Please do not send CD's or tapes.

| Name:                                      |               |               |  |  |
|--|---------------|---------------|--|--|
| Address:                                   |               |               |  |  |
| City:                                      | State/Prov:   | Zip+4/Postal: |  |  |
| Phone number: Day:                         |               | Evening:      |  |  |
| Email:                                     |               |               |  |  |
| Chapter affiliation (if any)               |               |               |  |  |
| If under 21, age:                          |               |               |  |  |
| Workshop(s) you are applying to attend:    |               |               |  |  |
| First choice                               | Second choice |               |  |  |
| Where did you hear about ARS scholarships? |               |               |  |  |

Other factors being equal, if the number of qualified applicants is large, priority will be given to those who have not received previous ARS scholarships.

Please note that any ARS scholarship must be used within the ARS fiscal year for which it was awarded before August 31.

A report detailing your experience is required within four weeks of the event. This way ARS donors can see how their funds have been used for a great cause.

| Section A: Level of Expertise   |               |  |
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| List recorder-related schools, workshops or clast<br>teachers with whom you have studied recorder   | •             | · ·  |
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| Section B: Applicant's Essay (Important) In the space of one page, please state why you would like  | a to attend a | a cummar workshop and why you are  |
| seeking financial aid to attend that workshop. Include how you will share your experience with others, <i>i.e.</i> teaching, performer or master class. If you are a student, include we have a student, include we have a student of the control of the co | w you expe    | ct to benefit, as well as ways in which planning a workshop, hosting a guest |
| educational goals.  |               |  |
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| <b>Section C: Letters of Recommendation</b> <i>Enclose</i> two letters of recommendation with your applica Letters should address the following: how long and in wh merit and promise, desire for personal enrichment, and p  | at capacity   | the reference has known you, musical   |
| 1. Name   | _ Phone:      |  |
| 2. Name   | _ Phone:      |  |
|   |               |  |
| Applicant's signature   |               | Date   |