

PO Box 480054, Charlotte NC 28269-5300 Toll-free: 844-509-1422 / Local phone: 704-509-1422 www.AmericanRecorder.org

Application for Weekend Workshop Scholarship

You can also apply online at https://americanrecorder.org/scholarships

Applications are accepted at any time for **weekend workshops** (those of four days or less), at least **four weeks** 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 recordings; they are not required.

| Name: | | |
|--------------------------------------|---------------|-----------------|
| Address: | | |
| City: | State/Prov: | Zip+4/Postcode: |
| Mobile phone number: | Email: | |
| Chapter affiliation (if any) | | |
| If under 21, age: | | |
| Workshop(s) you are applying to atte | end: | |
| First choice | Second choice | |
| Amount requested (up to \$175) | | |
| Where did you hear about ARS schola | arships? | |

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 List recorder-related schools, workshops or you have studied recorder. Give dates and details and details are considered as a second of the constant of the cons | classes you have attended, as well as teachers with whom egrees earned, if any. |
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| and why you are seeking financial aid to atte well as ways in which you will share your ex | ase state why you would like to attend a summer workshop nd that workshop. Include how you expect to benefit, as perience with others, <i>i.e.</i> teaching, performing, planning a ter class. If you are a student, include where you are in |
| | |
| office at director@americanrecorder.org). Li address the following: how long and in what | your application (or they can email their letter to the ARS st information about your references below. Letters should capacity the reference has known you, musical merit and I potential benefit to others of your experience. |
| 1. Name | Email: |
| 2. Name | Email: |
| use details about your project or workshop i | the generosity of our own ARS members, we may choose to n our fundraising efforts, or we may publicize the success of er magazine or in one of our other electronic or print citutes permission for us to do so. |
| | |

Date

Applicant's signature