Music Scholarship Application Form



Minimum Requirements

2.75 grade point average.

Proof of enrollment in at least 6.0 units in the Music program in the 2019-2020 academic year. Proof that you have completed at least 15 units of credit courses at COM. Be a student in good standing.

I. Academic Performance/Persistence

COM Major:				E	Expected Graduation	SP	FA	20
Current GPA	_If transferrin	g next year, wł	nere will yo	ou go? _				
Check Academic goal:	Degree	Transfer	Job training		Lifelong Learning	P	ersonal	Enrichment
Are you currently enroll	ed in a COM N	lusic class?	Yes	No				

II. Goal Statement: One page

Describe your academic activities, honors, community service, and volunteerism in the COM music program or related areas over the past 9 months. Please answer the question "Why should the COM Music Scholarship Fund invest in you?" And please describe how you are planning to continue your studies either at COM or beyond. *Single-page statement must be typed!*

III. Financial Need

Estimate your Expenses and Resources for August 2020 to May 2021.

Expenses at the Coll	ege you will attend:	Expected Inco	me	
Tuition & Fees	\$	Aid from pare	nts/relatives	\$
Rent & Utilities	\$	Financial Aid		\$
Food	\$	Your earned in	ncome	\$
Books & Supplies	\$	Spouse's earn	ed income AFDC,	\$
Transportation	\$	SSI, other ben	efits Child and/or	\$
Child Care	\$	Spousal Suppo	ort Other	\$
Other	\$	Income		\$
TOTAL	\$	TOTAL		\$
Current Employer:		Position:	Hrs/Wk:	Salary/Month:

IV. Contribution to Music-Indicate a number for each activity in which you participated in 2019-2020. If you sang in Oratorio for 2 semesters, mark "2." If you performed in one student recital, mark "1.")

Marin Oratorio	Chamber Singers
Symphony Orchestra	College Chorus
Wind Ensemble	Usher/Concessions
Jazz Band	Student Recital
Brass Band	Chamber Orchestra
House Manager	Stage Crew
Contemporary Opera Marin	
Number of VOLUNTEER hours not associated with class.	
Describe in Goal Statement	Number of Music classes this year
	OTHER:
	TOTAL:

Due: Friday, May 1, 2020 by 4 pm

V. Contact Information: please print clearly

NAME:			MOO#	
	LAST	FIRST		
ADDRESS				
	# STREET	APT. #	CITY	STATE/ZIP
PHONE NUMBER ()	Email		
Do you live with a par	ent or other adult relative	? (Do not include your spouse)	yes no	
SIGNATURE			DATE	
(can be typed if compl	ating this form digitally)			

(can be typed if completing this form digitally)

VI. STATEMENTS:

California law stipulates that scholarships must be made available to all students on an equal basis. The Marin Community College District is committed by policy not to discriminate on the basis of, or the perception of, race, ethnic group identification, ancestry, color, religion, age, gender, national origin, sexual orientation, disability (mental or physical), marital status, medical condition (cancer, genetic characteristics, or pregnancy), and status as a veteran, in any of its educational and employment programs and activities, its policies, practices, and procedures.

College of Marin students seeking instruction-related disability accommodations should contact the SAS Office, 415.485.9406.

In order to qualify for a scholarship, you must be a student in "good standing" (which means you have paid your college bills up until now). To confirm your status, your application will be reviewed by the Admissions and Records Office. To ensure there is no "overpayment" to students, all scholarship applications and awards must be approved by Enrollment Services

I give the Scholarship Committee(s) permission to review my academic record.

If selected, I authorize my name to be listed as a scholarship winner on any relevant programs or records, and to be announced at the music awards ceremony.

I have read the above statements and agree.

INITIAL HERE

(can be typed if completing this form digitally)

Application Check List

Completed Application Form: Incomplete applications may not be considered.

Unofficial Transcript showing music courses, units, and GPA: printed from the portal after March 1st.

One Page *Goals Statement*: Typed

Initial acknowledgement and understanding of Statements in Section VI. above

APPLICANT NUMBER

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