

Minnesota Federation of Music Clubs
**APPLICATION FOR SCHOLARSHIP
INTERNATIONAL MUSIC CAMP**

Applicant's Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

Date of Birth _____ Grade in School _____

MFMC FESTIVAL Date _____ Location _____ Rating _____

MFMC Teacher's Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

<u>International Music Camp (IMC) Session:</u> _____	
<u>IMC Session Dates:</u> _____	<u>Area of Study</u> _____

Signature _____ Date _____

- ✓ *Complete this page and the reverse side/second page of this form.*
- ✓ *Attach two Letters of Recommendation from adults who are familiar with your accomplishments and goals as a music student. One letter must be from your present MFMC teacher in the area you wish to study at the International Music Camp.*
- ✓ *Include a recording (mp3/mp4/CD) of you performing two scales and two selections of your choice.*
- ✓ *Return Application, Letters of Recommendation, and Recording by April 1st to:*
Karen Sue Erickson, 910 Westwood Drive SW, Alexandria MN 56308-2328
320-762-1713 or karensueerickson@gmail.com
- ✓ *Payment will be made directly to IMC on May 1st for your selected week if approved for scholarship. You must submit the International Music Camp registration forms and the \$150 non-refundable registration fee directly to IMC before May 1st to set up your account there.*

*Please Note: In the event of financial shortfall, advertised award amount may be adjusted.
Applicants will be notified of the award change.*

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Tell why you wish to study at the International Music Camp:

Signature _____ Date _____

Recording Information:

List the key signatures of the scales you recorded: #1 _____ #2 _____

Performance Piece #1:

Title _____ Composer _____

Performance Piece #2:

Title _____ Composer _____