2018-2019 Season

Applicant Signature

| APPLICANT INFORMATION  |  |
|--|--|
| First Name:  | Last Name:   |
| Primary Instrument:  | Years of Experience:   |
| How many years have you been a member of SMART? (check one)  O years (new member)  1-2 years  3+ years   | How many family members do you have performing with the SMART Orchestra this season? |
| AWARD AMOUNT   |  |
| Please select the scholarship amount you are applying for: (check one)  \$25 (25% off of membership dues)  \$50 (50% off of membership dues)  \$75 (75% off of membership dues)  \$100 (100% off of membership dues) – Only awarded in rare/exceptional cases  |  |
| ESSAY  |  |
| Please describe your interest in joining the SMART Orchestra and how this scholarship will help you:   |  |
| AGREEMENT  |  |
| <ol> <li>Acknowledge that the information on this application is correct and true to the best of your knowledge.</li> <li>Acknowledge your understanding that submission of this application form does not <i>guarantee</i> the applicant any form of financial assistance and that applicants may still be required to pay a portion or full amount of the standard membership dues.</li> <li>Acknowledge your understanding that amounts will be awarded based on funds available and will only be disbursed to the most qualified applicants or applicants with the most financial need as determined by the SMART Board of Directors.</li> </ol> |  |
|  |  |

Date