## AFA Application Form (all departments)

PROGRAM	SCHOOL INFORMATION
Please indicate your choice by checking 🗹 below. Double ma	ajors 2006-2007 School Attending
should indicate both programs.	Grade 2007-2008 School
☐ Orchestra/Chamber Music ☐ AFA Strings/Piano SET ☐ Piano ☐ Composition	X PERFORMANCE BACKGROUND
□ Choral □ Jazz ¹	Instrument Years Studied
☐ Middle School	Second Instrument (double majors only)
STUDENT INFORMATION	Private Teacher Tel #
Last Name	—— Orch/Band/Choir Director Tel #
First Name	
Nickname	A EA profess that Conservatory students attend the full duration of
Address	their respective program Please review the dates for your program
City State Zip Code	and list any potential schedule conflicts below.
Home Phone Cell Phone	
Email Gender	<del></del>
Date of Birth Current Age	AUDITION DATE
Ethnicity $\square$ African American $\square$ Asian $\square$ Caucasian $\square$ Hispanic/Latino $\square$ Native American $\square$ Pacific Islander $\square$ Multi-Racial $\square$ Other	Select three audition dates in priority order (e.g., 1, 2, and 3) and mark a preferred time. Composition students <u>must</u> send scores in advance. <b>Beaumont audition dates appear in bold.</b> Sat. March 10 (EHS)   AM   Noon   PM   Any
Have you attended AFA before? $\square$ Yes $\square$ No	Sat. March 10 (EHS) ☐ AM ☐ Noon ☐ PM ☐ Any Wed. Mar. 28 (Ft. Bend) ☐ PM
How did you hear about AFA?	
PARENT/GUARDIAN INFORMATION	Sat. March 31 (EHS) $\square$ AM $\square$ Noon $\square$ PM $\square$ Any
Father's Name	Sat. April 14 (EHS)
AddressStateZip Code	Wed. April 17 (Sth. Hou) ☐ PM Thu. April 18 (Sth. Hou) ☐ PM
Cell Phone State Zip Code Cell Phone Email	$\underline{\underline{}}$ Sat. April 16 (Sut. 1164) $\underline{}$ Noon $\underline{}$ PM $\underline{}$ Any
Employer Work Phone	Sat. May 5 (EHS)
Mother's Name	Sat. May 5 (SETX) 🔲 AM 🔲 Noon 🔲 PM 🔲 Any
Address	Sat. May 12 (EHS)
City State Zip Code	SCHOLARSHIP APPLICATION
Cell Phone Email	
Employer Work Phone	
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## AFA Scholarship Application

STUDENT INFORMATION	ARTISTIC BACKGROUND
Last Name	Instrument Years Studied
First Name	List all musical activities related to your field which demonstrate
Home Phone Cell Phone	your dedication and experience in music (school
SCHOLARSHIP ELIGIBILITY*	orchestra/band/choir, youth orchestra/choir, District Region/All-State, honors and awards, special performances).
Are you a United States citizen? $\square$ Yes $\square$ No	
Father's Employer	
Father's Title with Company	
Father's Work Phone	
Mother's Employer	
Mother's Title with Company	
Mother's Work Phone	
Combined Total Annual Family Income	
☐ Less Than \$25K/year ☐ \$50K-\$75K/year ☐ \$100K+/year	List any other school and community activities that you feel the Scholarship Committee should be aware of.
Describe all circumstances of either the applicant and/or the parent/guardian that might be considered a financial hardship or	
parent/guardian that might be considered a financial hardship or	
warrant special consideration by the Scholarship Committee (you	
may attach additional pages if necessary).	
	List any other items you feel the Scholarship Committee should take into consideration
* Additional information may be requested at the discourse of the Calabaratic Committee	
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