



# 2020-2021 APPLICATION FORM

## KATIE QUACKENBUSH SCHOLARSHIP PROGRAM

### APPLICANT INFORMATION

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Home address: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

High school: \_\_\_\_\_ Current grade: \_\_\_\_\_

### MUSICAL EXPERIENCE

Number of years of vocal study: \_\_\_\_\_ Voice type: \_\_\_\_\_

Choral programs in which you currently participate and/or vocal instructors with whom you currently study:

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### PERSONAL STATEMENT

Provide a brief statement (no more than 250 words) outlining your experience and achievements in the vocal arts, as well as your goals and intentions for future study.

### RECOMMENDATION

Ask a current teacher to complete and submit a recommendation form by Friday, April 24, 2020.

### AUDITION PREFERENCES (check all that apply)

Tues., May 12:       4:00 PM     4:30 PM     5:00 PM  
                          5:30 PM     6:00 PM     6:30 PM

### ACKNOWLEDGMENT

I, \_\_\_\_\_, acknowledge that if I am selected to receive the Katie Quackenbush Scholarship, I will be expected to fulfill the requirements of performing on the Sandlapper Singers Fall Concert (October 2020) and taking lessons with my selected voice teacher. If I fail to fulfill the requirements, the scholarship will not be awarded to me.

Signature: \_\_\_\_\_

**ALL APPLICATION MATERIALS MUST BE POSTMARKED OR EMAILED BY FRIDAY, APRIL 24, 2020.**

Submit your application by mail: Sandlapper Singers, P.O. Box 50261, Columbia SC 29250  
OR by email: [info@sandlappersingers.org](mailto:info@sandlappersingers.org)