

Due March 1 to Counseling Office

Music Educators or Students Majoring in Music (Vocal only)
Potosi Choral Boosters
SCHOLARSHIP APPLICATION

Name: _____
 Last First Middle

Address: _____

Class Rank: ____ of ____ Cumulative G.P.A. on 4.0 _____

Signature of Senior Counselor

Do you plan to become a teacher? ____ Yes ____ No

If not, how do you plan to use music in college?

Where do you plan to attend college? _____

Have you applied and been accepted? _____

What do you consider to be the positive aspects of becoming a teacher and/or
majoring in an area of music?

Signature of Applicant _____ Date _____