

# Kotzschmar Scholarship Application Form



INTENTION TO APPLY (via email to [info@foko.org](mailto:info@foko.org))

DEADLINE: Friday, April 30, 2021, by 6:00PM

APPLICATION MATERIALS DEADLINE: Friday, May 7, 2021, 11:59PM (time stamps will be noted)

**Please read the accompanying Rules and Requirements before completing this form.**

For an application to be considered complete, the following is required to be uploaded to your assigned DropBox folder:

1. A completed application form. If you apply online, our office will receive the information and upload it to your folder. If you plan to apply via a handwritten form, you must scan it and upload the PDF to your DropBox folder. (Contact our office if this presents any concerns.)
2. Your audition video file(s).
3. Your letter of recommendation from your private instructor, school music teacher or music society member. (If your selected person would rather send the file to our office by email, [info@foko.org](mailto:info@foko.org) or by mail P.O. Box 7455, Portland, ME 04112, it must be received before the May 7th deadline.
4. A copy of the score of each selection.

**MATERIALS MUST BE UPLOADED by 11:59PM on Friday, May 7, 2021**

Please call 207.553.4363 or email [info@foko.org](mailto:info@foko.org) with any questions.

## Applicant's Information

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street or P. O. Box City Country Zip Code

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age as of 4/1/21: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_

Instrument: \_\_\_\_\_ Years of Private Study: \_\_\_\_\_

Contact Information of parent/guardian for any applicants who will be under the age of 18 on April 1, 2021.

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

# Audition Performance Repertoire List

**MINIMUM OF TWO ARE REQUIRED**

Title of Composition: \_\_\_\_\_ Composer: \_\_\_\_\_

Edition: \_\_\_\_\_ Title of Movement & Number: \_\_\_\_\_ Length: \_\_\_\_\_

Title of Composition: \_\_\_\_\_ Composer: \_\_\_\_\_

Edition: \_\_\_\_\_ Title of Movement & Number: \_\_\_\_\_ Length: \_\_\_\_\_

Title of Composition: \_\_\_\_\_ Composer: \_\_\_\_\_

Edition: \_\_\_\_\_ Title of Movement & Number: \_\_\_\_\_ Length: \_\_\_\_\_

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## Solo Repertoire Performed During the Past Year

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

## Music Teacher Information

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street or P. O. Box City Country Zip Code

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## Accompanist Information

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street or P. O. Box City Country Zip Code

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_  
(if applicant is under age 18 on 4/1/21)

## Submission and Payment Details (if mailing)

**Scholarship Application Fee:** \$20

**Please make checks out to:** Kotzschmar Organ

**Mail to:**

Friends of Kotzschmar Organ

Attn: Scholarship Program

PO Box 7455

Portland, ME 04112