



Cecilian Music Club

Founded 1833

Cecilian Scholarship

Student Application Form

Please fill out and mail by the postmark deadline (available online) to:

Scholarship Chair, Barbara Lerro

26 Bernice Drive

Freehold, NJ 07728

1. Applicant Information (Please print)

Applicant's name: _____

Current Music Teacher: _____ Years of Study with him/her: _____

School presently attending: _____

Date of Birth: ___/___/_____ Age: _____ Grade level: _____

Address: _____ Telephone: _____

_____ Email: _____

2. Cecilian Club Participation: Below, please list the Cecilian Music Club events which you have participated in below (include year and level of participation):

3. Program Information

Name of Selected Program: _____

If your program is not included in our "suggested programs" list (see our website for list), a detailed description of the program is required, for example a brochure, website print-out, schedule, etc. If your program has a website and is not on our list, please provide the link below:

4. Application Essay: *In what specific ways do you expect that participating in Music Camp will help you expand your musical horizons and achieve your goals in music?*

Essays should be 300-400 words and not more than a page. Please make sure to answer the question above. Please attach essay on a separate sheet of paper with your FULL NAME, TEACHER'S NAME, and NAME OF SELECTED PROGRAM printed at the top.

5. Letter of Recommendation: Please ask your teacher to send us a letter of recommendation for you.