

TEACHER RECOMMENDATION for SCHOLARSHIP

This page is to be completed by the student's teacher.

Student's name _____

Please provide any information as to the student's financial need and musical ability. Include comments about musical accomplishments, activities, dedication to music, and other details about the family that you think are appropriate.

Please avoid using your student's name except in the required blank
(refer to student as he/she, student, etc.).

Include a recorded performance (tape, CD, DVD) of your student playing 3 solo repertoire pieces of contrasting styles and periods. Length of playing time should not exceed 15 minutes. Please have students announce their age, how long they have been studying, and the titles and composers of their pieces at the beginning of the tape. Also, include a list of pieces and composers, played. *Do not have the students announce their names on the recording.*

Teacher signature _____ Phone _____
Address _____

Please mail Teacher recommendation, Parent financial statement and recording of the student's performance to: Mitzi Babb, 7248 Petursdale Ct., Boulder, CO 80301

Application deadline is June 1, 2016