DOANE COLLEGE 1872

APPLICATION FOR SCHOLARSHIP IN MUSIC

Contact Information: (*Please Print*)

Name _____
First *Middle* *Last* *Preferred*

Address _____

City _____ State _____ ZIP Code _____

E-mail _____

Home Telephone (____) _____ Cell Telephone (____) _____

Family Information:

Name(s) _____ / _____

Occupation(s) _____ / _____

Business Phone(s) _____ / _____ Alma Mater(s) _____ / _____

Doane alumni/students whom you know _____

Sibling(s) _____

Academic Information:

High School/College _____ Graduation Date _____

Grade Point Average _____ Class Rank/No. in Class _____ / _____ ACT/SAT Score _____

Do you plan to major in music? _____ If yes, please check your anticipated area(s) of concentration below:

☐ Education ☐ Performance ☐ Other _____

If no, please list your anticipated college major: _____

Are you pursuing any other extracurricular scholarships at Doane College? ☐ Yes ☐ No

If yes, which one(s): _____

Music Information:

I am primarily a: ☐ Vocalist ☐ Instrumentalist

I plan to audition for (check all that apply):

☐ Vocal Scholarship - list voice part _____

☐ Instrumental Scholarship - list principal instrument _____

☐ Piano Scholarship

List piece(s) to be performed for audition:

Title: _____ Composer: _____

Title: _____ Composer: _____

Will you need an accompanist? ☐ Yes ☐ No

(If yes, email your music to audition@doane.edu at least one week prior to audition. Include your name and audition date in subject line.)

Open Audition Dates:

Select date and time preference for your Scholarship in Music audition. Upon receipt of this form, you will receive a confirmation letter with the scheduled time of your audition. Additional audition times can be arranged on an individual basis. Please contact the Office of Admission with any questions by calling 402.826.8641 or toll-free 800.333.6263.

☐ **Tuesday, February 7, 2012**
☐ **Monday, February 13, 2012**
☐ **Tuesday, February 21, 2012**
☐ **Friday, February 24, 2012**
☐ **Saturday, February 25, 2012**

Preferred audition time: ☐ AM ☐ PM

Save File - Email as Attachment Send to: suzy.cochnar@doane.edu **Reset the Form**