

# FREDERICK SMYTH INSTITUTE OF MUSIC



*Frederick Smyth*

## SCHOLARSHIP FUND APPLICATION

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_

School Now Attending: \_\_\_\_\_ Class of: \_\_\_\_\_

College You Plan to Attend: \_\_\_\_\_

Have you been accepted: \_\_\_\_\_

Tuition: \$ \_\_\_\_\_ Room and Board: \$ \_\_\_\_\_

What is your major, as defined by the School: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Names and ages of brothers and sisters and schools attending:

_____	_____
_____	_____
_____	_____

What is your primary musical instrument? \_\_\_\_\_

List your music background and your plans after you complete your college education:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List three music References: (Name, Address, and Phone Number)

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

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

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

I hereby make application for a music major scholarship for each of four years to attend college (as indicated). I understand that the scholarship for each year is dependent upon achieving academic and music proficiency satisfactory to the Trustees. I certify that all information given to the Trustees in this application and in my interviews and correspondence is and will be true and correct to the best of my knowledge and belief.

Applicant's Signature: \_\_\_\_\_

**You must submit your high school transcripts and a photo.**

Scholarships are applied to tuition only.

## FREDERICK SMYTH INSTITUTE OF MUSIC SCHOLARSHIP FUND APPLICATION FINANCIAL INFORMATION

1. Please list the income of all family members (living at home or otherwise dependent upon family income) in total for the current year (the next twelve months) from work and from other sources including investments and other outside income.

<b>Occupation</b>	<b>Yearly Income</b>
Student: _____	\$ _____
Your Father: _____	\$ _____
Your Mother: _____	\$ _____
Other Income: _____	\$ _____
<b>Total Family Income:</b>	\$ _____

2. Please list all anticipated family expenditures in total for the current year (the next twelve months).

Home Mortgage/Rent Payment	\$ _____
Car Loan Payments	\$ _____
Money Deposited in Savings	\$ _____
Household Expenses	\$ _____
Property Taxes	\$ _____
State and Federal Income Taxes	\$ _____
Medical Expenses	\$ _____
Tuition (other than applicant)	\$ _____
Insurance	\$ _____
Other Expenditures (specify) _____	\$ _____
<b>Total Family Expenditures:</b>	\$ _____
<small>(Should equal total family income #1 above)</small>	

3. Please list all scholarships, loans grants, and other financial assistance for which you have applied and reasonably expect to receive.

<b>Name</b>	<b>Amount</b>	<b>Number of Years</b>
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

4. Please list all funds actually set aside and earmarked for your education.

College Savings Accounts \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

5. Please describe any other factor; that may affect your ability and your family's ability to pay for your education.

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We certify that the foregoing information is true and if, during any period that scholarship aid is to be received from the Smyth Trust pursuant to this application, our circumstances change so that this information no longer reflects our true financial situation, we will notify you accordingly.

Applicant: \_\_\_\_\_

Dated: \_\_\_\_\_

Father: \_\_\_\_\_

Dated: \_\_\_\_\_

Mother: \_\_\_\_\_

Dated: \_\_\_\_\_

**Deadline, for submitting application: June 1st for Fall Semester.**

Scholarships will be awarded in mid-July, Any application submitted after June 1st will not be considered until the following year. Scholarships are not retroactive.