## MUSIC CLUB OF HOLLYWOOD 2025 SUMMER STUDY GRANT APPLICATION

Name		Age:	
Telephone:	( )	Mobile:	( )
Address:			
Email:			
INSTRUMENT:		VOICE:	
Teacher 1:		Length of Study 1:	
Teacher 2:		Length of Study 2:	
Teacher 3:		Length of Study 3:	
School Now Attending (use box below):		GPA:	
Are you receiving other scholarship funding. YES or NO			
If YES, please list:			
Name & Address of Summer Music Program (or Private Teacher):			
Student ID Number:			
If already receiving tuition support, what would you use this grant for? (be specific)			
Your signature will indicate that you have read and agree to abide by the instructions for the Scholarship Awards			
Signature of Applicant:			
Signature of Parent	:	Date:	
Application must be postmarked or emailed by February 28, 2025, for acceptance to the April 6 Live Auditions. Students will be accepted to audition live based upon their video submission and will be notified.			
Mail Application Form or send any questions to: Howard Rosen. 1410 N. 35th Avenue, Hollywood Florida 33021 or emailed to mcohscholarship2@gmail.com			