



**ALLEN ORCHESTRA BOOSTER CLUB  
SCHOLARSHIP APPLICATION**

Student Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Instrument \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Parents Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ Primary phone \_\_\_\_\_

1. Please list your academic grade averages for the last complete grading period (i.e., the previous six weeks or last years final grades.).

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Please list any information that would help in determining students need for this scholarship

---

---

---

---

---

---

---

---

---

---

---

---

**Scholarship money can be used for:**

**Private Lessons - out of school - Fall or Spring**  
**Private Lessons - in school - Fall or Spring**



**ALLEN ORCHESTRA BOOSTER CLUB  
SCHOLARSHIP APPLICATION**

**Scholarship Stipulations:**

1. Scholarship amount is **up to \$200** a semester.
2. One scholarship per secondary campus in Allen ISD will be awarded (5 awards per semester)
3. All scholarships will be paid directly to the organization or teacher in which you have applied for.
4. Scholarship money will only be used for organizations approved by the Allen Orchestra Booster Club.
5. Students are allowed to pick one organization from the approved list.
6. Scholarship will be paid after verification of enrollment or verification of participation with private teacher.
7. Students are required to participate in the organization or lessons for a semester. Failure to complete the entire semester will result in a forfeit of the scholarship. If scholarship is forfeited, the recipient will be required to pay back the total amount of the scholarship that was received.
8. Students must be enrolled in an Orchestra class at their respective campus for the full year.
9. The Scholarship recipient will be recommended by the orchestra teacher at the campus which he/she attends school to the Allen Orchestra Booster Club. The Allen Orchestra Booster Club will have final approval of the scholarship.
10. Final determination of the scholarship recipient will be determined by **Financial need, Passing grades, Participation in Orchestra and Overall Attitude.**

**Private Lessons out of school:**

Teacher's name \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_ Home address \_\_\_\_\_

Cost of each individual lesson \_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Orchestra Teacher Approval* \_\_\_\_\_ *Date* \_\_\_\_\_

*Booster Club Approval* \_\_\_\_\_ *Date* \_\_\_\_\_

*Please email this form to the AOBC President: <http://allenorchestra.org/boosters/>*