

# Sparta Music Boosters

## Application for 2019 Band Activity Fee \$100 Matching Fund Scholarship

Instructions: Please complete the following form and return to the address on the bottom no later than May 14<sup>th</sup>. To be considered you must submit all information by this date.

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ Cell: \_\_\_\_\_

Student Email Address \_\_\_\_\_ Grad. Year: \_\_\_\_\_

Name of Parent: \_\_\_\_\_ Telephone: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Do you receive free/reduced lunch?  Yes  No

If yes, you will receive an additional \$25 off the activity fee as we are getting school lunch provided for band camp.

In a few sentences describe why you are applying for this scholarship:

Amount requested \$ \_\_\_\_\_. You can request up to \$100 matching funds. For every dollar you pay we will match up to \$100. You will receive notification of how much you have been awarded no later than June 1<sup>st</sup>.

Reason: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Considerations (financial hardship, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

In order to be considered for this scholarship you **MUST** agree to the following:

- ❖ 10 total volunteer hours to be completed by both the student and parent (in any combination adding up to 10 hours). There are many opportunities to volunteer. Signup can be done at [www.charmsoffice.com](http://www.charmsoffice.com) (School Code: spartamusic)
- ❖ You must also agree to participate in fund-raisers. Signing up for our SCRIP program is also a great way to earn funds for your student without any added cost. If you are interested in signing up for SCRIP, you can do so at BC Pizza on Thursdays from 5-7pm or at any concert. In the event that you fundraise an amount exceeding the activity fee, the boosters may request a reimbursement of the scholarship funds through the family account.

By signing below, I declare that all statements in this agreement are true to the best of my knowledge. If selected to receive a scholarship, I promise to complete the volunteer hours during the 2019 marching band season and participate in fundraisers. All information within this application is considered confidential and will not be shared outside of the Sparta Music Boosters executive board.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail to :  
Sparta Music Boosters  
PO Box 223  
Sparta, MI 49345  
Attn: Scholarship Application