

[SCHOLARSHIP APPLICATION]

ODPC Band Academy (OBA) | SCHOLARSHIP Application Form (Please complete the form by parent/guardian and return to ODPC Band Academy by July 15th, 2017)

Applicant's name _____

DOB _____ Applicant's age _____

Gender _____ Entering Grade _____

School _____

Home Address _____

City _____ State _____ Zip _____

Contact Number _____

Primary Parent/Guardian's Name _____

Parent/Guardian's Contact Number _____

Parent/Guardian's e-mail _____

1) Please attach one of the following proofs of need:

- An official letter from the applicant's school stating he/she qualifies for free or reduced lunch
- A completed 2016 tax return with the applicant listed as a dependent. W-2s will not be accepted.

If you wish, please explain any circumstances, which qualify your child for a need-based scholarship.

2) I agree to contribute \$_____ to my Applicant's academy tuition if she/he is granted a scholarship. I understand \$10 is the minimum contribution. Please include any other sources of financial aid to which you have applied for academy tuition (e.g. social services, religious group, community group, etc.).

3) Please give the attached recommendation form to your Applicant's teacher. (School or Church) Name of Teacher (Pastor) _____

School/Church _____

Grade _____

4) I certify that the information in and accompanying this application is complete and accurate to the best of my knowledge.

I have read and understand the ODPC Band Academy (OBA) scholarship information and agree to abide by the application process set forth and the decision of the scholarship committee.

Sign

Date

Witness

Date

*Please complete this form and email to odpcbandacademy@gmail.com

or mail to ODPC Band Academy 3001 Centreville Rd. Herndon, VA 20171

[ODPC Band Academy (OBA) | SCHOLARSHIP Reference Form]

(Please complete this by applicant's teacher/pastor & Return to ODPC Band Academy (OBA) by July 15th, 2017)

_____ (Applicant) has applied for a scholarship to attend ODPC Band Academy (OBA) this summer. ODPC Band Academy (OBA) is a week, Contemporary music camp, focusing on the pursuit of instrument play, self-discovery and joy through the musical stuff.

Thank you for agreeing to complete this form. We are more interested in the ability of the applicant to participate and contribute to a group of peers positively than in his or her academic or even musical abilities. This information will be kept confidential.

Name of Reference _____

Address _____

City _____ State _____ Zip _____

Contact Number _____

School / Church _____

Grade Taught ____ How long have you known the applicant and in what capacity?

Please indicate your opinion/observation of the following:

Attendance- Excellent .Good .Average .Poor .N/AComments

Motivation/enthusiasm- Excellent .Good .Average .Poor .N/AComments

Peer relations- Excellent .Good .Average .Poor .N/AComments

Interactions with adults- Excellent .Good .Average .Poor .N/AComments

Emotional maturity- Excellent .Good .Average .Poor .N/AComments

Leadership- Excellent .Good .Average .Poor .N/A

Comments _____

Behavior- Excellent .Good .Average .Poor .N/A

Comments _____

Self-esteem- Excellent .Good .Average .Poor .N/A

Comments _____

In your opinion, does the applicant show signs of creativity and/or musical aptitude? ____
Please describe.

Any additional comments you may have that might help us in our selection process would be greatly appreciated. Feel free to use the back of this form. We also welcome any comments or questions you may have about ODPC Band Academy (OBA). We can be reached at 571-363-0411 odpcbacademy@gmail.com .
(Director)

Signature of Reference _____ Date _____

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