

APPLICATION FOR 2023 SCHOLARSHIP AUDITION

ENTRY FEE \$20.00 - This form must be returned fully completed by 26th August

Surname: _____ First Name: _____

Address: _____

Email: _____ Ph: _____

Instrument: _____ Years studied: _____ DOB: __/__/__

A program of **two contrasting works** is required- **maximum duration 10 minutes**

Ensure **ALL** four sections below (title, composer, approx length and accompanist) are completed

Title	Composer	Approx time
_____	_____	_____
_____	_____	_____

Name of Accompanist (if required) _____

Please write N/A if there is no accompanist - (NB the accompanist must be arranged by you)

CURRENT TEACHER _____

PREVIOUS TEACHER/S (if applicable) _____

LAST EXAMINATION RESULTS (if applicable)

Practical

Name of Exam Body (AMEB etc) _____

Instrument _____ or Voice Grade _____ Year _____ Result _____

Music Craft / Musicianship / Theory

Name of Exam Body (AMEB etc) _____

Music Craft / Musicianship / Theory (circle one) Grade _____ Year _____ Result _____

A brief musical biography, written and signed by each applicant, should include the main musical activities over the past twelve months.

Tell us why you would like to receive a scholarship. Please attach extra pages if necessary

TEACHERS REPORT / COMMENTS :

This section must be completed by your teacher – it should indicate musical aptitude, achievements and potential. (The teachers report may be handed in as a separate document)

PLEASE READ & RETAIN THE ATTACHED SCHOLARSHIP CONDITIONS BEFORE SIGNING & RETURN TO:
Mitchell Conservatorium, 130 Havannah St, Bathurst 2795
PO Box 1387 Bathurst, NSW, 2795
or email to bathurst@mitchellconservatorium.edu.au

I have read and accept all Scholarship Conditions

Parent/Guardian Signature_____ **Date**_____

Student's Signature_____ **Date**_____

Teacher's Signature_____ **Date**_____

Fee payment of \$20.00 – please select one of the following

- 1) to be invoiced by Mit Con
- 2) pay via credit card ____/____/____/____ expiry date ____/____