



BRANDON FESTIVAL OF THE ARTS, INC.
Office 130
100 – 1300 – 18th Street
Brandon, Manitoba R7A 6X7

BRANDON UNIVERSITY PRESIDENT'S FESTIVAL OF THE ARTS SCHOLARSHIP

Brandon University offers a scholarship covering full tuition for one year to a student entering Brandon University as a full-time music student. This scholarship will be awarded by the School of Music Scholarship Committee to a student who delivers an outstanding performance in the Brandon Festival of the Arts. To be eligible for this scholarship, entrants must perform in two or more solo classes in the same discipline in the current festival.

Please return this form by **March 14, 2018** to:

School of Music
Queen Elizabeth II Music Building
270 – 18th Street
Brandon, MB R7A 6A9



To be awarded to an entering student in the School of Music who delivers an outstanding performance during the Brandon Festival of the Arts

APPLICANT INFORMATION (Please print)

Name (last, first and initial)	
Instrument/Voice	
Social Insurance Number	
Mailing Address (including postal code)	
Telephone Number	
Email Address	
Gender	
Date of Birth (D/M/Y)	

BRANDON UNIVERSITY INFORMATION (Please print)

I have completed an application form for Brandon University School of Music. (circle one)	YES	NO
Brandon University Student Number (If not yet assigned, leave blank)		
My audition is scheduled for: (day/month; leave blank if unscheduled)		
My applied area of study will be: (voice, piano, trombone, clarinet, etc.)		
I am participating in the following classes of the Brandon Festival of the Arts:		
My current private music teacher is: (indicate name(s) and instrument(s)/voice)		

HIGH SCHOOL INFORMATION (Please print)

Name of high school	
Date of graduation	
Approximate grade 12 average is	%
Name of high school music teacher	

DECLARATION:

I declare that:

- all information given on this application is complete and true in every respect;
- I have answered all questions applicable to me on this form;
- should I receive this award, my intention is to enroll in the BU music program;
- I will notify the Scholarship Office, in writing, of any changes in my address or telephone number.

Signature

Date

Brandon University collects the personal information on this form pursuant to the Brandon University Act and The Freedom of Information and Protection of Privacy Act. The information you provide on this form is used for purposes of determining eligibility for awards. It may also be used for research purposes, but, in those cases, individual identities will not be disclosed.

The names of award recipients may be publicly recognized and made available to the corresponding donors. Any questions or concerns regarding the release of this information can be directed to Janet Olmstead Wood at 204-727-9737.

OR:

If you do not wish your name and award to be publicly recognized, please complete and sign the statement below.

I, _____, ask that my name and award not be publicly released.

Signature

Date