Music Scholarship Recommendation Form

To be completed by high school principal or counselor, and music teacher:

Applicant: __________________________, Date ______________________

Scholarships require a personal or recorded audition which enables us to judge musical talent with some success. Information regarding the student’s academic ability and work ethic is also valuable. We appreciate your assistance in providing this important data below and returning this form to us as soon as possible. Please send this, along with a letter of recommendation directly to:

Dr. James Randall, Director
School of Music
University of Montana
Missoula, MT 59812

Name_______________________________________
Instrument/Voice_____________________________
Rank in Class__________, Class Size__________

Please evaluate the student on the following criteria:

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<th>Rating Scale (1 is highest)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<td>Responsibility</td>
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<td>Ability to Complete a four-year college course</td>
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Additional Comments (Please include how long you have known the student, and in what capacity).
_____________________________________________________________________________________
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_____________________________________________________________________________________
_____________________________________________________________________________________

Signed:______________________________, Position:______________________________

Address:_______________________________________________

Music scholarships are available to qualified students without regard to race, color, religion, age, national origin or ancestry, gender, sexual orientation, mental or physical disability, marital status, or veteran status.