

CHESTER E. AND MARION D. GROTH SCHOLARSHIP FUND
APPLICATION
2024-2025

Name: _____

LAST

FIRST

MIDDLE

Permanent Address: _____

STREET

CITY

STATE

ZIP

Telephone: _____ Email: _____ Birth Date: _____

EDUCATION:

High School attending or have attended: _____

City, State: _____

Date Graduated or anticipated to Graduate: _____

What is your major course of study, or intended study? (Be specific. Example: Vocal music education, trumpet performance, etc.) _____

If your major course of study is music therapy, please answer the following on a separate sheet of paper:

What steps have you taken to understand this career?

What steps have you taken in proficiency in voice, guitar, and piano?

What was your cumulative grade point average (GPA) as of the most recent semester or quarter? _____
(Please enclose an official high school transcript with your application.)

Are you currently a United States Citizen or have you applied for citizenship? _____

REFERENCES:

Send three letters of recommendation including at least one who has been your school music instructor or private music teacher – use the enclosed format for references.

Name: _____ Phone: _____

Relationship: _____

Name: _____ Phone: _____

Relationship: _____

Name: _____ Phone: _____

Relationship: _____

FINANCIAL INFORMATION

How do you intend to finance your college education? (please be specific)

[This scholarship covers tuition and mandatory student fees only.]

Are you receiving any other scholarships? Please list:

MUSIC EDUCATION AND BACKGROUND (answer on a separate sheet if you need more space)

List any lessons, or experiences that you consider to be formal music training. Include dates of participation.

Other music activities, such as band, school chorus, church choir, etc.

Extracurricular, volunteer and community activities (not necessarily music-related).

What are your professional goals?

How might this scholarship help you achieve your goals?

WORK EXPERIENCE

Company Name: _____	City/State: _____
Supervisor's Name _____	Phone: _____
Position Duties: _____	
Dates of Employment: _____	
Company Name: _____	City/State: _____
Supervisor's Name _____	Phone: _____
Position Duties: _____	
Dates of Employment: _____	

If selected for an audition, do you have any time requests for Sat., March 16, 2024? _____

ATTACH AN ADDITIONAL SHEET IF YOU NEED MORE SPACE FOR ANY OF THE ABOVE.

Part of the requirements of this scholarship, if you are chosen to be a recipient, is to perform for one worship service or musical event at Richfield United Methodist Church within the scholarship year. That date will be chosen in consultation with the Director of Music.

I HAVE READ THE ELIGIBILITY REQUIREMENTS FOR THE Groth Music Scholarship and, if I am granted a scholarship, agree to these requirements.

Signed: _____ Date: _____