

2012 APPLICATION FORM
EVANSTON MUSIC CLUB SCHOLARSHIP

Deadline for receipt of the application is March 19, 2012.

www.evanstonmusicclub.org

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-Mail: _____

Instrument or Voice: _____

Please indicate if you need a special time for your audition AM PM

Year in College: _____

Degrees, if any: _____

Accompanist's Name: _____

Name of School: _____

Name(s) of Teacher(s) _____

Teacher's Signature: _____

Tentative Selections for Audition: _____

This form and your resume may be mailed or e-mailed to:

Bob Klassy
670 W. Parkside Drive
Palatine, IL 60067-9030
Phone: (847) 217-3449
BKlassy@aol.com

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