

Application for Organ Lesson Scholarship

date:_____

Church Organ Lesson Scholarship Fund, St. Andrew Lutheran Church Foundation

Student's Name_____ Telephone_____

Address_____

Email_____ (An interview will be scheduled.)

Parent/Guardian's Name_____ Telephone_____

Address_____

Email_____

Age of student_____ Current school grade_____

Number of years studying Piano _____ Organ_____

Other instruments studied _____ Number of years_____

Commitment statement from student: As an organ student I agree to practice, to attend lessons, and to notify the teacher in advance before missing a lesson. I understand that if I fail to honor the terms of the scholarship, then the lessons may be terminated at the teacher's discretion after consultation with the Scholarship Committee.

Signature of Student_____

Commitment statement by Parent/Guardian (if student is under 18): I promise to support and encourage my student's study of organ.

Signature of Parent/Guardian_____

Recommendation by current piano or organ teacher: I recommend the above-named student for consideration for a Church Organ Lesson scholarship.

Signature of Teacher_____ Telephone_____

Printed name of Teacher_____

Send the completed application to Judy Scholz, Church Organ Lesson Scholarship Committee, St. Andrew Lutheran Church, 12405 SW Butner Road, Beaverton, OR 97005 by **October 4, 2021.**