

WMTA Summer Scholarship Program 2024

AWARD: \$500, awarded to a maximum of 4 applicants
ELIGIBILITY: Open to students of WMTA members
AGE LIMIT: 12 – 18 years old

APPLICATION DEADLINE: MAY 15, 2024

Washington Music Teachers' Association (WMTA) is offering scholarship opportunities for middle and high school students of WMTA members, to be used for music workshops/summer programs in the United States. This Summer Scholarship Program will grant financial assistance to music students, ages 12-18, who wish to experience intensive music study in summer programs. Scholarship winners are encouraged to participate in at least one WMTA in-person or virtual event.

REQUIREMENTS:

If you are a WMTA member and would like your students to take advantage of this opportunity, please have them submit the following:

- A completed application form
- An essay of minimum 300 words: *"How will this scholarship help me?"*
- An audition video recording of two contrasting pieces. **YouTube** link with *unlisted* format preferred.
- Proof of acceptance to local or sleep-away music workshop or summer music program
- A copy of the applicant's letter of agreement/confirmation with the summer program
- A recommendation letter from the student's private teacher + a paragraph from an unrelated adult, as a character reference

Please note: Awardees are ineligible to apply the following year.

Applications must be either:

- a) Postmarked by Saturday, May 15, 2024, and mailed to the chair:
Mary Kading, 8921 Ridge Pl, Bethesda, MD 20817-3371
OR
- b) E-mailed as a PDF to wmtadc@gmail.com by 11:59 on May 15, 2024

Awardees will be announced by May 31, 2024.

APPLICATION FOR SUMMER SCHOLARSHIP PROGRAM 2024

Student Name: _____

Student Address: _____

Student E-mail: _____

Student Birthdate: _____

Parent's name and email: _____

WMTA Teacher and email: _____

Instrument studied: _____ Number of years studied: _____

Name and Address of summer program you plan to attend:

Signature of Student

Signature of WMTA Teacher

Parent/Guardian's signature: _____ Date _____

Please complete, scan and email this form, including all requirements, to wmtadc@gmail.com

OR

mail by USPS to: Mary Kading, 8921 Ridge Pl, Bethesda , MD 20817-3371