

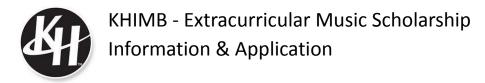
KHIMB - Extracurricular Music Scholarship Information & Application

The KHIMB – Extracurricular Music Scholarship is intended to give students of Kenowa Hills Instrumental Music ensembles an opportunity to develop their musical integrity and knowledge through participating with ensembles or other educational events that are not accessible within the school district.

The board will distribute scholarships based on the following guidelines:

- 1. The recipient must be in an acceptable academic standing, based on the discretion of a Kenowa Hills ensemble director.
- 2. The program must be approved by a Kenowa Hills ensemble director.
- 3. The recipient must be accepted into the program in which they are applying for a scholarship.
- 4. Each member can be awarded one scholarship per school year.
- 5. KHIMB will award a 50% scholarship (**up to \$500**) per program.
 - a. This will be 50% of the total cost of the parent/guardian's payment.
- 6. If the member **does not complete the program** which the scholarship is awarded, the scholarship must be reimbursed by the student to the KHIMB prior to the student's graduation or they will not be permitted to graduate (*this is not to be the responsibility of the extracurricular program and any contractual agreement with said program must still be honored*).
- 7. Applications can be submitted to the KHIMB booster president (khmboosters@gmail.com)
- 8. Applications must be submitted no less than **30 days prior** to fee due date.
- 9. Approved scholarships will be paid by check written to the program in which the student is participating.

| I agree to the above terms and condition | ns: | |
|--|---------------------|----------|
| Student: | | |
| Signature: | Date / / | |
| Parent/Guardian: | | |
| Signature: | Date / / | |
| | | |
| | | |
| Section below to be completed by KHIM | B Booster President | |
| Amount Awarded: \$ | | |
| Approved by: | Signature: | Date / / |
| | | |
| | | |



PERSONAL INFORMATION

| Student Name: | | Graduation Year: | | |
|--|--------|---|--|--|
| Phone: | Email: | | | |
| Choose all ensembles in which student is involv | ed: | | | |
| Concert Band Marching Band Orchestra | 0 | Jazz Band Percussion Ensemble Other | | |
| I approve applicants outside involvement with underlying ensemble | | | | |
| Kenowa Hills Director Signature | | Date / / | | |
| PROGRAM INFORMATION | | | | |
| Program: | | | | |
| Active dates: / / / / | | | | |
| Cost: \$ Due date of funds:/ | _/ | | | |
| Description of program: | | | | |
| | | | | |
| Personal involvement with program: | | | | |
| | | | | |
| | | | | |

ESSAY QUESTIONS (complete on separate sheet for answer development)

Academic progress: this includes GPA, course load, extenuating circumstances and challenges overcome in your academic endeavors.

Extracurricular activities: including all scholastic, recreational and civic activities including pageantry. Identify YOUR accomplishments and responsibilities for these activities.

Future plans: your goals for post education and how you might be able to use talents gained from the activity to give back to your school and/or community.

Why do you want or need this scholarship?

I certify that the above and enclosed information is complete and true.

Applicant ______ Date ___ / ___ /

I have reviewed the above application and recommend this member for the KHIMB Scholarship.

Program Director/Coordinator _____

Signature_____ Date ___ / ___ / ___

ALL SCHOLARSHIP APPLICATIONS WILL REMAIN CONFIDENTIAL