## RHS Band Association, Inc. 2024 Scholarship Application

Name:					<del></del>
Email:Address:					
Names of first three college choices:					
1.					
2.					
3.					
Intended major field of study:					
In what grade(s) were you a member of the RI	HS Band? 9	10	) 11	12	(circle all that apply)
In what grade(s) did you participate in the foll	owing: (atta	ch se	parate	page	if necessary)
Marching Band:					
Concert Band:					
Wind Ensemble:					
Jazz Ensembles:					
Symphonic Band:					
Color Guard:					
Band Council:					
Small Ensembles:					
Winter Guard:					
Band Fundraising Participation:					
Leadership positions (indicate type and years)	):				
Other (please specify) musical participation ie	, honor band	ls, ma	aroon a	and w	hite recital:

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**Essay:** In one page or less, please tell us what you would say to an incoming freshman who was trying to decide whether he or she should join the band/color guard program.

Please scan and send the completed application and essay to Mrs. Laura Lutz @ LLL61398@gmail.com

Complete applications must be received no later than Friday, April 5th at 11:59pm.

There will be no exceptions.

Student signature:	Dat	e:

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RHS Band Association, Inc. 2024 Scholarship Application – Essay