

Band Booster Scholarship Application

To the student: Please complete this application carefully and completely. Return the application to Mr. Young no later than March 10. It will be used as a guideline for the interviews in determining scholarship awards.

Student's Name: _____

Address: _____ City: _____

Phone number: _____

Years in Wills Point Band:

High School _____ years

Junior High School _____ years

Middle School _____ years

Other schools
(outside of WP) _____ years at _____

Wills Point Band Involvement:

Marching Band _____ years

Symphonic Band _____ years

Jazz Band _____ years

Instruments Played:

Primary Instrument _____

others _____

Individual Musical Awards and Accomplishments (list in order from beginner to present) _____

Band Accomplishments (list any accomplishments of any band you have been associated with - symphonic, marching, jazz, ensembles, etc.)

Musical involvement outside of school (church, community, etc.)
