

□ □ TIM STOICA MEMORIAL SCHOLARSHIP □ □
(Must be majoring in music related field)

Name: _____ Phone: _____
(Last) *(First)*

Address: _____
(Street) *(City)* *(State)* *(Zip Code)*

GPA _____ Class Rank _____ ACT _____

FAFSA EFC _____

Extra-Curricular Activities

List offices held

- 1.
- 2.
- 3.
- 4.
- 5.

Community Activities

- 1.
- 2.
- 3.
- 4.
- 5.

What college do you plan to attend?

What is your proposed area of study?