

SECTION 2 (to be completed by parents/guardians/sponsors of dependent children)

STUDENT NAME _____ CURRENT SCHOOL _____

FATHER/GUARDIAN _____ OCCUPATION _____

HOME ADDRESS _____ ZIP _____

HOME PHONE _____ WORK / CELL (circle) _____ EMAIL _____

EMPLOYER _____

MOTHER/GUARDIAN _____ OCCUPATION _____

HOME ADDRESS (if different) _____ ZIP _____

HOME PHONE _____ WORK / CELL (circle) _____ EMAIL _____

EMPLOYER _____

WHERE APPLICABLE: SPONSOR _____

HOME ADDRESS _____ ZIP _____

HOME PHONE _____ WORK/ CELL PHONE (circle) _____

FAMILY INCOME (to be submitted by all applicants) Applications will not be processed without this information. *Family income is defined as taxable income, including wages, interest, dividends, etc. The amount reported on this scholarship application should agree with your adjusted gross income as reported on your federal income tax return. In a sealed envelope, please attach a copy of Page 1 of your IRS form (1040, 1040A, or 1040EZ) on which the student is claimed as a dependent. If filing status of the form is "Married Filing Separately," then you must also include a copy of Page 1 of the spouse's tax form...*

Filing jointly _____ **FAMILY ADJUSTED GROSS INCOME \$** _____

Married but filing separately _____ **Number in family** _____

Other educational expenses, musical achievements and/or additional information that may be pertinent:

I support my child's participation in the Eastman Pathways Community Music School Scholarship Program. All accepted students will be required to attend the mandatory orientation session on June 1, 2010 in the Eastman School of Music's Kilbourn Hall. Students are required to attend with their parent or guardian. Scholarship recipients will be asked to complete a registration form and pay an annual \$20 registration fee; this fee is due at the orientation session. Students will be expected to have regular access to an appropriate instrument for practice and provide required music and text. Parents agree to provide transportation to and from the Eastman School of Music for attendance at weekly lessons, chorus, classes, and recitals.

PARENT SIGNATURE _____ **DATE** _____

SPONSOR SIGNATURE where applicable, _____ **DATE** _____

* Provide 2008 Adjusted Gross Income if 2009 not available. Include income of both spouses if filing status is "Married Filing Separately."

EASTMAN PATHWAYS
Student Self-Reflection Form
(Renewal Applications only)

- 1) How many years have you been in Pathways? _____
- 2) Have your lessons and classes made you more committed to your instrument now than you were when you began Pathways? Y__N__
- 3) Do you feel you find the right amount of time to practice to ensure your personal growth? Y__ N__
- 4) This year, have you attended a concert or recital by a collegiate Eastman ensemble or student? Y__ N__
- 5) Have you used the Sibley Music Library by checking out music scores or listening to recordings? Y__ N__
- 6) Please explain why you wish to continue in the Pathways program:

7) Describe the most valuable aspect of your lessons this year at the Eastman School of Music?

8) How will you use what you have learned through this experience?

9) Please describe how this program can be improved:

10) Please rate yourself in each category from "4" (exceeds) to "1" (needs improvement).

	4	3	2	1 (Needs Improvement)
Tone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technique	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Musicianship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rhythmic Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signed _____

Name (Please Print) _____ Date _____



ROCHESTER CITY SCHOOL DISTRICT

ROCHESTER CITY SCHOOL DISTRICT

CONSENT AND RELEASE

I _____, hereby irrevocably consent to allow the Rochester City School District to disclose my child's _____ (name of child) academic grades to the faculty and staff of the Eastman Community Music School. I understand that in order for my child to retain the Eastman Pathways Scholarship:

- Students must be in good academic standing in the RCSD:
 - o Maintain a 2.0 or C average
 - o Not fail any class

RCSD grades will be checked after marking periods. If the student receives a grade below a 2.0 or has a grade(s) that does not meet qualifications, the student will be placed on academic probation by the RCSD Executive Director of the Visual and Performing Arts. The student will have until the end of that academic year to meet the grade requirements above. If the GPA or grade is not raised by the end of the year, the scholarship will not be renewed for the following year.

I understand that my child's grades may be monitored quarterly and that if any grade is below a C, these grades will be shared with the faculty and office staff of the Eastman Community Music School.

Signed: _____

(Student)

(Parent/Guardian)

Date: _____



ROCHESTER CITY SCHOOL DISTRICT

RCSD – Eastman Pathways Scholarship Commitment

I understand that as an RCSD – Eastman Pathways Scholarship student, my commitment is to “give back” by fully participating in the music program at my school, and at the All City Music Festival district program. My failure to do so will result in cancellation or reduction of my scholarship.

Pathway Scholarship Student’s signature

Parent or guardian signature