## EASTMAN SCHOOL OF MUSIC - ROCHESTER CITY SCHOOL DISTRICT

## Eastman Pathways Scholarship Program Application Form

STUDENT'S FULL NAME	ECMS USE ONLY ∼ NEW □ R	ETURNING
(Last Name) (Middle Initial)	1 Application complete a Student Signature and date b Parent Signature and date c Other pertinent	Y N
STUDENT'S ADDRESS	information" section	
Number Street Name	2 Proof of Income 3 RCSD Grade Consent and	
	All City Commitment form 4 Copy of January report card	
	( <u>all</u> students)	
	5 Recommendation from RCSD Music Teacher	
Apartment # City or Town State Zip Code	For Returning Students Only 6 Self-Reflection Form	
Phone: Home Cell	7 Performance requirements complements mandatory for continuation	
Student Email Date of Birth Sex: \( \sigma M \) \( \sigma F \)	a ECMS recital b MCSMA &/or NYSSMA c To be completed: Citywide	
RCSD School Grade	d To be completed:	
RCSD Music Teacher Instrument	ECMS jury in May 2018  8 Is audition required?	

## **Student Agrees to:**

- Notify teachers in advance of any absence
- Attend weekly lessons or chorus on time bringing music and instrument
- Practice daily
- Choral students will attend all choral concerts
- Those taking private lessons will
  - o Perform in at least one ECMS recital during the 2018-2019 year (two if in the diploma program)
  - o Participate in the annual NYSSMA (In-House or other) or MCSMA solo festival
  - o Perform in home school music ensemble on the instrument or voice being studied at Eastman
  - o Fulfill the expectations of the private teacher at Eastman and take an annual performance jury at Eastman
- Participate in the annual Citywide RCSD concert or other give-back option if not your instrumental year

Please note that: Attendance policies will be strictly enforced. Students with excessive unexcused absences will be asked to resign their scholarships.

STUDENT SIGNATURE	DATE

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

FATHER/GUARDIAN			
HOME ADDRESS			
ZIPEMAIL	ZIPEMAIL		
HOME PHONE	HOME PHONE		
WORK / CELL (circle)	WORK / CELL (circle)		
OCCUPATION	OCCUPATION		
EMPLOYER	EMPLOYER		
WHERE APPLICABLE: SPONSOR			
HOME ADDRESS	ZIP		
HOME PHONEWORK / CELL (circle)	EMAIL		
income as reported on your federal income tax return. In a sealed envelope, please attacclaimed as a dependent. If filing status of the form is "Married Filing Separately," then Single Filing jointly FAMILY AD	The amount reported on this scholarship application should agree with your adjusted gross is a copy of Page 1 of your IRS form (1040, 1040A, or 1040EZ) on which the student is		
Please explain why you may need additional scholarship assistance. (i.e. education	onal expenses, employment status, etc.)		
	idents are required to attend with their parent or guardian. The Director of Arts, RCSD, registration from and pay an annual \$20 registration fee; this fee is due at the orientation r practice and provide required music and text. Parents agree to provide transportation to		
PARENT/SPONSOR SIGNATURE	DATE		
* All applicants - Include income of both spouses if filing status is "Married Fi	iling Separately		