## APPLICATION FOR THE FRIENDS OF EASTMAN OPERA

## **SUMMER PROGRAM GRANT**

Deadline: March 22, 2024

Name		Date	
Email		Phone	
Voice Type		Program of Study	
Primary Teacher		Year of Study	
		ENDATION FROM YOUR PRIMARY TO HARD COPY WILL NOT BE ACCEP	
Program Title/Location		Dates	
Describe your participation in the program			
What do you expect to gain from this program?			
PROGRAM COSTS FUNDING SOURCES			
PROGRAM COSTS			
Tuition		Personal/Famiily	
Lodging and Food		Program Scholarship	
Transportation		Other sources (specify)	
Other costs (specify	')		
то	OTAL COSTS*	TOTAL FUNDING	*
*Total Costs must equal Total Funding			
1) up-to-date ( 2) a copy of y		ailable, go ahead and submit your ap ram or a link to its website	oplication without it)

SEND THIS APPLICATION AND REQUIRED DOCUMENTS TO feogrants@gmail.com.