

Rollie Heltman Memorial Music Scholarship Award

Student Application

Name _____ Date _____

Address _____ City & Zip _____

E-mail _____ Telephone _____

School _____

Music Director _____

Circle the school music group(s) you participate in - Band, Choir, Orchestra

Years of Participation _____

New Mexico University of Choice _____

Include the following with this application:

Resume

High School Transcript

Student Essay

Letter of Recommendation #1

Letter of Recommendation #2

Applicant's Signature _____

Director's Signature _____