

**Reading Musical Foundation**

**Mailing Address: PO Box 14835, Reading, PA 19612**

**Offices: GoggleWorks, 201 Washington Street, Suite 503, Reading, PA 19601**

**Tel.: 610-376-3395 Fax: 610-376-3336**

**Email: [kshultz@readingmusicalfoundation.org](mailto:kshultz@readingmusicalfoundation.org)**

Please check which scholarship you are applying for (check all that apply):

- Peter J. Brye Cello & Harp Fund (Grades 7-11)
- Butler Accompanist Fund (Grades 8-11)
- Chairman's Fund (Grades 7-12)
- Irvin & Lois E. Cohen Vocal Summer Camp Program (Grades 7-11)
- James E. Fegley Orchestral String Summer Camp Fund (Grades 7-11)
- Henry & Elizabeth Gass Brass Fund (Grades 7-11)
- Gladys & Carl Jensen Summer Camp Fellowship Program (Grades 7-11)
- Sally S. Breidegam Miksiewicz Vocal Music Scholarship (Grades 7-9)
- Edward & Madeline Nawrocki Percussion Fund (Grades 7-11)
- Willis M. Rapp Percussion Summer Music Camp Fund (Grades 7-9)
- Solomon Frank & Phyllis Ensher Peters Scholarship Fund (Grades 7-11)
- Runyeon Piano Scholarship Fund (Grades 7-9)
- Scheidt/Heslop Jazz Fund (Grades K-12)
- Work Family Woodwind Fund (Grades 7-11)
- Wyomissing Foundation Middle School Brass Program (Grades 7-9)
- I'm not sure where I qualify, please pick the appropriate fund for me.

Applicant's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Parents/Guardian Names \_\_\_\_\_

Phone Number \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Instrument \_\_\_\_\_

Music Teacher's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Camp Name \_\_\_\_\_

Location \_\_\_\_\_ Date \_\_\_\_\_

Total Cost \_\_\_\_\_ Other Scholarship Awards \_\_\_\_\_

Reason(s) you chose this camp \_\_\_\_\_

Please explain your family's financial situation as it relates to this request \_\_\_\_\_

Other instruments played/voice studied \_\_\_\_\_

School/Other Music Activities \_\_\_\_\_

How did you learn about RMF's Scholarship Program? \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Signature of Music Teacher \_\_\_\_\_

**Other Requirements:**

1. Write and enclose with this application an essay about your musical goals, experiences, or why you study music. Also address what you expect to gain from attending this particular summer music camp.
2. Teacher Recommendation (Google Form Link at [readingmusicalfoundation.org](http://readingmusicalfoundation.org) under "Scholarships")

**Reminder to Applicant/Music Teacher:** The summer camp scholarship program is considered need-sensitive, meaning that students with apparent need are preferred over those without noted need. Please address any known financial need (student qualifies for reduced lunch, single parent family, multiple siblings, etc.) in either the applicant's essay or the letter of recommendation from the music teacher.

Completed application, essay and teacher recommendation should be sent to the address at the top of the application. Please contact Keri Shultz, President, at (610) 376-3395 with questions.

**Deadline for Summer Camp Scholarships**  
**Friday, May 4, 2018 (decisions made by Monday, May 14, 2018)**