

**LIVINGSTON COUNTY CHORALE
MARILYN S. JONES VOCAL MUSIC SCHOLARSHIP
Sunday, February 27, 2011
3:00 P.M.
First Baptist Church, Howell Michigan**

Amount of scholarship: \$1,000 for 1st place, \$500 for 2nd place and \$300 for 3rd place
Award checks will be issued to approved music school, music camp or vocal teacher designated by winners.

Contact persons: Sharon Cardeccia Vickie Weyand
 248-685-2766 810-220-6207

QUALIFICATIONS:

1. Must be a resident of Livingston County or attending a high school in Livingston County.
2. Must be a graduating senior in the current school year and must be accepted at a college or university no later than June of the current year, **or**
3. Must be a sophomore or junior, who, by the end of the school year would be attending a certified vocal music school for the summer of 2011 (i.e. Blue Lake, Interlochen), or be a student of a certified voice teacher accepted by the LCC Board.
4. First place winners from prior years are ineligible to participate in this competition.

REQUIREMENTS:

1. Student must have a satisfactory recommendation from his or her teacher. **This will be used to determine eligibility.**
2. Student shall perform a musical selection from or comparable to music selected for MSVMA Solo and Ensemble Festival.

APPLICATION FORMS WITH TEACHER'S RECOMMENDATION MUST BE MAILED BEFORE OR POSTMARKED NO LATER THAN FRIDAY, FEBRUARY 1, 2011, TO THE FOLLOWING ADDRESS:

**THE LIVINGSTON COUNTY CHORALE
P.O. BOX 151
BRIGHTON, MICHIGAN 48116**

NOTE: Applicants will be notified regarding their status in the final competition. Finalists will compete before an outside panel of judges. **Each performer must supply her or his accompanist.**

**The Livingston County Chorale
Marilyn S. Jones Vocal Scholarship Competition
Application Form**

PRINT OR TYPE ALL INFORMATION LEGIBLY

Name _____ Birthdate _____

Address _____

City _____ ZIP _____

Phone Number (____) _____ Email Address _____

Name of School _____

Grade and Date of Graduation _____

Parent/Guardian _____

Choral Director/Private Teacher _____

Years of Vocal Study _____ Your Voice Part _____

SELECTION TO BE PERFORMED (please print clearly)

Title _____

Composer _____

Accompanist (if known at this time) _____

Participation in this competition will be limited to the first 25 applications received from qualified participants. The teacher's recommendation will be used to determine eligibility.

Return this application along with your teacher's recommendation form **by February 1, 2011**

THE LIVINGSTON COUNTY CHORALE
P.O. BOX 151
BRIGHTON, MI 48116

THE LIVINGSTON COUNTY CHORALE
MARILYN S. JONES VOCAL SCHOLARSHIP COMPETITION
February 27, 2011
Recommendation Form

This form is to be completed by the applicant's high school music teacher or private vocal music teacher. This recommendation will qualify the student to participate in the scholarship competition. **Please be discriminating in your recommendation so that it will accurately portray the musical ability of your student. We trust your judgment to provide us with qualified candidates.**
(Please print or type clearly)

APPLICANT'S NAME _____ AGE _____

SCHOOL _____ GRADE _____

NAME OF RECOMMENDER _____

POSITION: ___ SCHOOL MUSIC TEACHER ___ PRIVATE VOCAL TEACHER
___ CHURCH MUSIC DIRECTOR

PLEASE RATE THIS PERSON IN EACH CATEGORY 1-5 (5=BEST)

VOCAL TALENT _____

MUSICIANSHIP _____

DESIRE TO IMPROVE _____

INTEREST IN PURSUING VOCAL STUDIES _____

MATURITY/STABILITY _____

ABILITY TO ACHIEVE GOALS _____

I DO ___ DO NOT ___ RECOMMEND THIS STUDENT AS
QUALIFIED TO PARTICIPATE AT THIS TIME

Please enclose the completed form in a sealed envelope before returning it to the student you are recommending. This form will remain confidential.

SIGNATURE: _____