



# THREE RIVERS COLLEGE

## MUSIC DEPARTMENT ENSEMBLE AND SCHOLARSHIP APPLICATION

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

High School Band/Choir Director: \_\_\_\_\_

Anticipated Three Rivers Enrollment Date: \_\_\_\_\_ College Major: \_\_\_\_\_

List musical organizations you have participated in (include school, church, and community activities):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you also auditioning for a music scholarship at this time? Yes \_\_\_ No \_\_\_

Will you receive any other scholarship to attend Three Rivers? Yes \_\_\_ No \_\_\_ Explain: \_\_\_\_\_

### INSTRUMENTALISTS

Major Instrument: \_\_\_\_\_ Other instruments you play: \_\_\_\_\_

Have you studied privately: \_\_\_\_\_ Instrument studied: \_\_\_\_\_ # of Years: \_\_\_\_\_

### VOCALISTS

Voice Type: Soprano \_\_\_ Alto \_\_\_ Tenor \_\_\_ Bass \_\_\_

Have you studied privately: \_\_\_\_\_ # of Years: \_\_\_\_\_

*Three Rivers College is an Affirmative Action/Equal Opportunity Institution.*

Three Rivers College is an equal opportunity institution that commits itself to the policy that there will be no unlawful discrimination against any person because of race, color, gender, sexual orientation, religion, age, disability, or national origin.

Please return completed application to:

Music Department • Three Rivers College • 2080 Three Rivers Blvd • Poplar Bluff, MO 63901

This application may be emailed to [cwhite@trcc.edu](mailto:cwhite@trcc.edu) or [wwhite@trcc.edu](mailto:wwhite@trcc.edu).



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## MUSIC DEPARTMENT APPLICATION REFERENCE

**TO THE APPLICANT:** Please print and sign your name to indicate your agreement with the waiver statement below. Submit this form to your music teacher or church music director along with a stamped envelope addressed to the Music Department. This form must be completed by a non-relative.

*I waive my right to review this recommendation so that the person completing this form may do so without reservation.*

Applicant's Name (printed): \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TO THE MUSIC TEACHER:** In order to determine an applicant's eligibility for a music scholarship, Three Rivers College requests your evaluation of his or her musical and social abilities. Please complete and sign this form and return it to Three Rivers College. We respect your position in conducting the evaluation. If you wish to speak with a music instructor about this applicant, please call 573-840-9639.

Reference Name: \_\_\_\_\_ Title or Subject Taught: \_\_\_\_\_

School Name/Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please rate the applicant in the following areas:

Characteristics	Exceptional	Good	Average	Below Average	No Opportunity To Observe
Musical Performance					
Music Reading Skills					
Cognitive Skills					
Organizational Skills					
Motivation					
Maturity					
Dependability					
Integrity					
Concern for Others					
Emotional Stability					
College Success Potential					

Comments: \_\_\_\_\_

Your recommendation of this applicant to Three Rivers College:

- Strongly recommend  
 Recommend  
 Recommend with reservation  
 Do not recommend

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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