

# HYDE PARK SUZUKI INSTITUTE, INC.



5500 S. Woodlawn Avenue • Chicago, IL 60637 • 773-643-1388 • [www.hydeparksuzuki.com](http://www.hydeparksuzuki.com)

## Music Activities Scholarship Application and Agreement

**All applications will be considered based on the availability of funding for the program.**

To apply for Hyde Park Suzuki Institute's Music Activities Scholarship Program, you must observe a group class, observe a private lesson and audition. Limited scholarships are available. Students that are not selected for the scholarship may also apply for Financial Aid. Student must be high school senior or below.

Please apply as early as possible. Return your completed application to HPSI. Original applications must be submitted by mail or hand-delivered to HPSI no later than the published deadline.

### How to Apply:

1. Complete all sections of the Application including the Letter of Agreement.
2. Call HPSI for help completing the application.
3. Only completed and signed applications will be considered.
4. Applications from families with an outstanding account balance will not be considered until the balance is paid in full.

### Award:

1. Full tuition scholarship. Student pays any fees and provides their own instrument and music.
2. Award applies to one calendar year only.

### Award Obligations:

1. Student must perform with school ensembles in recitals and performances.
2. Consistent attendance at lessons, classes and/or ensembles by student and parent/guardian.
3. Consistent practice and preparation for lessons, classes and/or ensembles.
4. Positive evaluations from teachers.
5. Parent or Guardian of the student will assist with HPSI fundraising activities, if asked to do so.

**Hyde Park Suzuki Institute  
Music Activities Scholarship Application**

Please complete all sections of this application. Only complete applications will be considered. The attached Letter of Agreement must be returned with your completed application.

**PLEASE TYPE OR PRINT CLEARLY – Answer all questions carefully.**

**Instrument** \_\_\_\_\_

**Application Date:** \_\_\_\_\_

**Enrolling Student's Name**

	<b>Date of Birth:</b>
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**Name of Parent/Guardian**

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**Billing Address:**

<b>Street:</b>	<b>Apartment No:</b>
<b>City/State/Zip</b>	

<b>Home Phone:</b>	<b>Work Phone:</b>
<b>Mobile Phone:</b>	<b>Email:</b>

**Emergency Contact:**

<b>Name:</b>	<b>Address:</b>
<b>Phone:</b>	<b>City/State/Zip:</b>

1. How long has the student studied the instrument?
2. Who is the student's current instructor?
3. What academic school does the student attend? (If home schooled, indicate so in your answer)
4. How much does the student practice per day, per week?
5. Does the student perform in any other programs or ensembles?
6. Can the parent/student attend the HPSI chamber ensemble class as scheduled?
7. Can the parent/student take private lessons and group classes as scheduled?

**Hyde Park Suzuki Institute  
Letter of Agreement- Music Activities Scholarship**

**Name and Address of Applicant (Parent/Guardian or Adult Student):**

<b>Name:</b>	<b>Date of Birth</b>
<b>Street</b>	<b>Phone:</b>
<b>City/State/Zip</b>	<b>Email:</b>

**Name of Student:**

Receiving the HPSI Music Activities Scholarship is dependant upon the student meeting the following expectations as outlined below:

1. Student must perform with school ensembles in recitals and performances.
2. The parent or guardian of the student agrees to participate in fundraising activities and/or to assist with functions if asked to do so.
3. The parent or guardian and the student will attend and be on time for all lessons, classes and ensembles for which they are registered. If the student is unable to attend a session, the parent or guardian will notify the teacher as soon as possible. Repeated absences will jeopardize the student's scholarship eligibility.
4. The parent or guardian and student will practice and prepare for each lesson according to requirements designed by the teacher and student.

Students receiving scholarship will be evaluated twice during the academic year to verify compliance with the above expectations.

Failure to meet the above expectations may result in the loss of scholarship and/or suspension of lessons.

I certify that I have read and understand this Letter of Agreement and, where applicable, have discussed it with the student listed above. I agree to abide by these expectations and assist the students with them.

I further certify that I have provided current, accurate and truthful information. I understand that, should I receive the scholarship, I will be responsible for paying any applicable fees by the deadlines established by HPSI.

**Signature of Parent(s) /Guardian**

	Date:
	Date:

<b>For Office Use Only:</b>	<b>Application &amp; Agreement Received:</b>	
<b>Approved <i>Initial:</i></b>	<b>Denied <i>Initial:</i></b>	<b>Audition Date:</b>
<b>Reason:</b>	<b>Signature:</b>	