

**FERRWOOD 2017 SCHOLARSHIP APPLICATION
RULES AND PROCEDURES**

*You are encouraged to read this entire document, **failure to follow the procedures will result in a disqualification.***

As Ferrwood grows in popularity, the number of students seeking financial assistance is also growing. Our ultimate goal is to give every child financial assistance, however, that is simply not possible. To be as fair as possible, I have selected a committee of individuals to review the applications and to decide who will receive a scholarship. The committee has outlined the following criteria to be used in determining who will receive a scholarship.

Criterion:

- a. The student must be an active member of a performing organization either in school or out of school. Examples include but are not limited to, school band, orchestra, chorus, church choir, community performing groups etc. The director of the organization must submit the Ferrwood Director Letter of Recommendation attached to this application. A student must demonstrate commitment to studying / playing music.
- b. The student must reside in the Hazleton, Weatherly, or Crestwood Area School Districts. Please note since the vast majority of scholarship donors and businesses reside in the Hazleton Area, the vast majority of scholarships will be given to HASD students. The amount of Scholarships given to non HASD students will be commensurate with the amount of scholarship money provided by individuals and businesses in those areas.
- c. Although financial need is not a prerequisite to submit an application, students demonstrating financial need will be given priority consideration.
- d. Students who received a scholarship last year can re-apply, however, if the necessary volunteer hours by students and parents were not completed last year, the student will be disqualified.
- e. Scholarship recipients and their parents are required to volunteer THREE to FIVE hours at camp. These hours can be accomplished before, during or after the season.
- f. Applications must be received by May 8th. Applications received after May 8th 2017 will **not** be considered.
- g. Students need to complete the student / parent part of this application. After completing the student / parent part of this application, the student needs to submit their portion of this application along with the Ferrwood Director Letter of Recommendation to their band / chorus director. The directors must complete the Ferrwood Director Letter of Recommendation and forward the **complete** packet to Phil Latella. ***(a completed packet must consist of the student / parent portion of the application as well as the Ferrwood Director Letter of Recommendation)***

THE DIRECTOR MUST FORWARD THE COMPLETED PACKET TO:

Phil Latella , C/O HTELC 1400 West 23rd Street Hazle Township, PA 18202.

HASD directors can use in-school mail, all others must mail the application.

FERRWOOD 2017 SCHOLARSHIP APPLICATION

STUDENT / PARENT SECTION

Applications must be received by May 8th

Complete this section and give it to your chorus/orchestra/band director along with the Ferrwood Director Letter of Recommendation. The director should return this application along with the Ferrwood Director Letter of Recommendation Form to Phil Latella , C/O HTELC 1400 West 23rd Street Hazle Township, PA 18202

Please print all information.

Name of Applicant: _____ Phone: _____

Email: _____

School / District Currently Attending (2016/17): _____

Address: _____

Age: _____ Grade: _____ Instrument: _____ Your **WORKING** Phone # _____

▶ If awarded the scholarship I understand that I must volunteer at least 5 hours during the summer.

Student Signature _____

▶ If awarded the scholarship I understand that I must volunteer at least 3 hours during the camping season.

Parents Signature _____

Some scholarships are earmarked for students with financial need, others are not. Please indicate your level of financial need. (this information will be held in the strictest of confidence)

____ little but it would be helpful

____ Some need but it would be helpful

____ Tremendous need (selecting this option signifies the camper will NOT be able to attend without a scholarship)

If you are awarded the scholarship, please select only one week:

Week #1 July 2nd – July 7th ____ Day Camp ____ Resident Camp

Week #2 July 9th – July 14th ____ Day Camp ____ Resident Camp

Ferrwood Director Letter of Recommendation

Applications must be received by May 8th.

Must be completed by school band director, choral director, or private music instructor.

Please take a few moments to complete the following questions. Any additional comments can be added at the end or the back of this page. Thank you. THE DIRECTOR MUST FORWARD THE COMPLETED PACKET TO:

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Student Name _____ Director's Name _____

Student participates in (check all that apply):

- School Lessons
- Private Lessons
- School Concert Band
- School Jazz Band
- Community Bands
- Festival Bands, Music Camps (i.e. Marywood, PMEA, MIOSM Honors, previous Ferrwood years)
- Student does not participate in any of the above to my knowledge

Please list which Festivals and/or Camps student participated in and how many years for each.

_____ Years _____

_____ Years _____

_____ Years _____

_____ Years _____

_____ Years _____

Highest level of music student has performed in ensemble(s) (check one):

- .5
- 1.0
- 1.5
- 2.0
- 2.5
- 3.0
- 3.5
- 4.0

How many years of private instruction on their instrument? _____

How would you rank your recommendation of this student based on student interest? (check one)

- Highly recommend
- Good recommendation
- Fairly recommend
- Do not recommend

How would you rank your recommendation of this student based on student character? (check one)

- Highly recommend
- Good recommendation
- Fairly recommend
- Do not recommend

How would you rank your recommendation of this student based on student leadership? (check one)

- Highly recommend
- Good recommendation
- Fairly recommend
- Do not recommend

How would you rank your recommendation of this student based on student attendance? (check one)

- Highly recommend
- Good recommendation
- Fairly recommend
- Do not recommend

To the best of your knowledge, what is the student's level of financial need to attend camp?

- Highly needs financial assistance
- Possibly needs financial assistance
- No financial assistance needed
- Have no knowledge of student's financial status

Please write any additional comments if needed on the bottom and/or back of this page.

Thank you for your time and consideration!

Director/Instructor Signature _____

Date _____

Additional Comments: Use the back side of this paper if you need more room

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