

ELSENER AWARD SCHOLARSHIP APPLICATION 2012
a partnership with the SUFFOLK CHAPTER
of the
AMERICAN GUILD OF ORGANISTS

NAME _____ AGE: _____

ADDRESS _____ PHONE _____

_____ EMAIL _____

TITLE AND COMPOSER OF PIECE TO BE PERFORMED: (Please specify piano or organ)

HYMN: (Please give the tune name and the name of the hymnal or book from which it is being played)

If you are currently studying piano or organ with a teacher, please give the teachers' names below and state how long you have studied with them.

PIANO STUDENT OF: _____

Dates of study: _____

ORGAN STUDENT OF: _____

Dates of study: _____

Please attach a typed paragraph explaining why you would like to study the organ.

PLEASE NOTE: Award recipients under the age of 17 will be asked to sign a Statement of Commitment, which will also need to be signed by a parent or legal guardian and the organ teacher.

Completed applications must be postmarked by March 16, 2012. Please enclose a non-refundable application fee of \$20 payable to "Suffolk Chapter AGO" and send to:

Dr. Joan Daly-Lewis
Suffolk AGO Scholarship Committee
9 Sands Lane
Port Jefferson, NY 11777