

Idaho Federation of Music Clubs Collegiate Awards Application

Instrument or voice _____ Date _____

Full Name _____

Age _____ Birthdate _____

University/College attending _____

Year in school _____

College Address _____

Phone _____ Email _____

Permanent Address _____

Are you an Idaho resident and have an Idaho graduation certificate? yes _____ no _____

Please list private teachers with whom you have studied in the last eight years: *This list is confidential and is only needed to prevent conflict in the selection of judges.*

PERFORMANCE SELECTIONS

Title _____ Composer _____ Length _____

Title _____ Composer _____ Length _____

Title _____ Composer _____ Length _____

Title _____ Composer _____ Length _____

I hereby certify that I, the applicant, have read all the requirements for entrance in the Idaho Federation of Music Clubs Awards Auditions:

Applicant's signature _____

Signature of Department Head or professor _____