



# Music Scholarship Application Form

## PERSONAL INFORMATION:

Student's Name:

Date of birth:

Home Address:

Phone Number:

Previous school attended:

Applying  
for the Academic Year:

Year Group (BISB):

## FATHER'S INFORMATION

Father's Name:

Mobile Number:

Email:

Home Address:

Employer – Company Name  
and Contact Person:

Position at the Company:

Self-employed/  
Entrepreneur – Name  
of your company/ies:

## MOTHER'S INFORMATION

Mother's Name:

Mobile Number:

Email:

Home Address:

Employer – Company Name  
and Contact Person:

Position at the Company:

Self-employed/  
Entrepreneur – Name  
of your company/ies:

## FINANCIAL INFORMATION:

How many people live in your household?

During the last year, how much was your total yearly household income (before taxes and expenses)

## MUSIC DETAILS:

Chosen Musical Instrument/Voice:

Number of years playing this instrument/singing:

Current Music Club:

Other musical talent:

Name of Current Music Teacher  
(if you have more than one teacher, please provide details for the one with whom you have most regular contact):

Email Address:

Contact Telephone Number:

Musical ability (please include performances, orchestras, competition dates, concerts, choirs as appropriate):

State Your ABRSM Performance Examination Level/Trinity College Examination (or similar examination level), if appropriate:

Musical achievements over the last two years  
(performances, orchestras, competition dates, concerts, choirs as appropriate and contribution to music):

## REFERENCE:

Please provide details of one person qualified and willing to act as referees e.g. voice coach, instrumental teacher, or other teacher:

Name:	Name:
Position:	Position:
Telephone Number:	Telephone Number:
Email Address:	Email Address:

WARNING: PROVIDING FALSE AND/OR INCOMPLETE INFORMATION MAY JEOPARDIZE A STUDENT'S SCHOLARSHIP APPLICATION AND CAN BE CANCELLED ANYTIME DURING THE STUDENT'S STUDY AT BISB.

### DECLARATION:

WE DECLARE THAT INFORMATION ON THIS FORM IS TRUE, CORRECT AND COMPLETE. THE BISB HAS OUR PERMISSION TO VERIFY THE INFORMATION REPORTED BY OBTAINING DOCUMENTATION AS NEEDED.

Father's signature:	Mother's signature:
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## FOR OFFICAL USE ONLY:

Scholarship Granted:
Amount (%):
Comments:
Admission Officer Signature:
Date: