



Band _____
Choir _____
FAME _____

Angelo State University Department of Art & Music Scholarship Application

Academic Year _____ Initial Application _____ Renewal _____

PLEASE TYPE or PRINT ALL INFORMATION

Name _____
Last First M.I.

CID or SSN# _____ Date of Birth: _____

Local Address: _____

Permanent Address: _____

Email: _____ Local Phone: _____

Current Status: (check all that apply)

- High School Senior ASU Freshman ASU Upperclassman
- Transfer Student from: _____
- Art Major _____ (Specialization) Music Major _____ (Major Instrument/Voice Classification)
- Non-Major Band/Choir _____ (Major Instrument/Voice Classification)

If a Current ASU or Transfer Student:

Current GPA _____ Expected Date of Graduation _____

If a Senior in High School:

Composite ACT Score: _____ Combined SAT 1 Score: _____ Senior Class Rank _____

Do you have or will you have other scholarships from ASU? Yes No

If Yes, Name of Scholarship _____

Amount: _____

What Art/Music Awards have you received in High School or College _____

What are your Career Plans after graduation from ASU? _____