

Matt Buth Memorial Music Scholarship

This Scholarship is open to any student in Volusia County who has been involved in an official VCS Band or Chorus for a minimum of one year.

ADDRESS		
CITY	STATE	ZIP
EMAIL ADDRESS		
DATE OF BIRTH (MM/DD/YYYY)		
PREFERRED GENDER PRONOUNS		
CURRENT HIGH SCHOOL		
EXPECTED GRADUATION DATE		
TENTATIVE PLANS	S FOR ATTENDING CO	LLEGE OR TRADE SCHOOL
NAME OF INSTITUTION		
ADDRESS		
CITY	STATE	ZIP
HAVE YOU APPLIED TO THE ABOV	/E INSTITUTION? YES	S NO
HAVE YOU BEEN ACCEPTED IN W	RITING?	
WHAT DO YOU PLAN TO STUDY?		

LEADERSHIP POSITIONS IN HIGH SCHOOL ACTIVITIES:

ACTIVITY	POSITION(S) HELD	YEARS AC	TIVE
COMMUNITY A	CTIVITIES / VOLUNTEER SER	EVICES OVER THE PAST	
, ROANIZATION/ACTI			SCHOOL TEAK
SPECIAL AWAR	RDS, COMMENDATIONS, MER	ITS EARNED WHILE IN H	HIGH SCHOOL:
AWARD/HONOR	GIVEN SPECIFICALLY FO	OR YEAR	
			_

REFERENCES: (3 REQUIRED - PERSONS NOT RELATED TO YOU)

Band/Music Teacher	CLASS
EMAIL	
I recommend student for scholarship (Signature)
Teacher/Admin	CLASS
EMAIL	
I recommend student for scholarship (Signature)
YOUR CHOICE	CLASS
EMAIL	
I recommend student for scholarship (Signature)
POSITION OR ROLE OF "YOUR CHOICE"	

Complete this application form, attach your official high school transcript, including sophomore through senior (first semester) years, along with ACT or SAT scores (if taken) and your personal essay. No photos please.

Essay Topic: What impact has music had on your life thus far, and how do you see yourself continuing to include music in your life going forward?

No other writing parameters are requested. Please feel free to just write.

INCOMPLETE OR LATE APPLICATIONS (including essay & transcripts) WILL NOT BE ACCEPTED.

Please mail your packets (postmarked by) March 31st to:

Matt Buth Foundation, Inc

PO Box 624

DeLand FL 32721-624

^{**} Any questions can be emailed to: MattButhFoundation@gmail.com