



# Instrument Scholarship REQUEST FORM

<b>OFFICE USE ONLY</b>	
Instrument:	_____
Brand:	_____
Serial #:	_____
Date Issued:	_____

This form should be completed by the instrumental music teacher, not a parent or student. If all the boxes are not checked and the form does not have all the requested signatures, we will not be able to provide an instrument. Please print.

Student's Name:	Age:	Grade:
Instrument Choice (must provide 2 choices) 1st Choice:	2nd Choice:	
School Name:		
Band/Orchestra Director's Name:		
Band/Orchestra Director's Email:		
Principal's Name:		
School Phone #:		
School Address:		

The student above has been recommended to receive an instrument from Chirp. This student has met all of the following prerequisites for qualifying for the program:

- The student is officially enrolled at your school.
- The student participates or desires to participate in the instrument program at your school.
- The student has demonstrated a good work ethic in the classroom.
- The student is in good academic standing.
- The student has demonstrated an aptitude in music.
- The student is a responsible young person who will show respect for the instrument.
- The student's parents or guardians have been unable to secure an instrument through conventional means.

We understand that this request will be fulfilled based on the availability of the instrument requested. The instrument may be used by the above student for as long as that student participates in the school instrumental music program. If an instrument is granted on scholarship to this student, the school agrees to monitor its use and return the instrument to Chirp should the above student no longer need the instrument.

Principal's SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Band/Orchestra Director's SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Mail the completed form to:  
Bandland, Attn: Chirp, 154 East Pike Street, Clarksburg, WV 26301

