

WMA Preparatory Program Application:

Name: _____ Age/Grade in September: _____

Instrument: _____ Teacher: _____

Number of years studying: _____ Any additional instruments played: _____

Contact Information (if different from what is currently on file or if you are not a current WMA student):

Parents/Address/Phone/Email: _____

Please submit a personal essay discussing your musical aspirations and why you want to participate in the WMA Preparatory Program (submit on a separate sheet of paper attached to this application).

Applicants should also submit a letter of recommendation from their private teacher. Teacher recommendations can be submitted directly to Sarah.

Auditions will be scheduled upon receipt of application. Interview may be requested.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Teacher Signature: _____ Date: _____

Office Use Only: Date Received:

Audition Scheduled:

Interview Scheduled: