

For office use only:

Award _____ Amount _____
Award _____ Amount _____
Award _____ Amount _____
Total Award(s): _____
Thank you letters received? Y N
UM Foundation Form received? Y N



For Adviser use only:

Renew Y N
If no, why? _____
Extra conditions: _____
Adviser name: _____

MUSIC DEPARTMENT SCHOLARSHIP RENEWAL FORM

NAME: _____ DEGREE GOAL: _____

MISSOULA ADDRESS: _____ MISSOULA PHONE: _____

HOMETOWN: _____

INSTRUMENT/VOICE: _____

SOCIAL SECURITY/STUDENT ID NUMBER: _____ MAJOR: _____ CUM. GPA: _____

For music majors a 3.0 (B) is required in the major studio area of music; a 2.75 G.P.A. must be maintained in all academic music courses. I HEREBY GIVE PERMISSION FOR THE MUSIC DEPARTMENT TO RELEASE MY GPA TO SELECTED PARTIES FOR SCHOLARSHIP CONSIDERATION. (Please sign below)

STUDENT SIGNATURE: _____

IN ORDER TO PLAN OUR SCHOLARSHIPS AND AWARDS MOST EFFECTIVELY FOR THE 2009-2010 ACADEMIC YEAR IT IS VITAL THAT WE HAVE CERTAIN INFORMATION REGARDING THIS YEAR'S RECIPIENTS. PLEASE HELP US CONFIRM OUR CURRENT RECORDS AND PROJECT EXPENDITURES BY ANSWERING THE FOLLOWING QUESTIONS:

Did you send a thank you to your benefactor per our request? Y N

How many years have you received your scholarship(s), including the current year? _____

What is your annual award? \$ _____

What is your current class standing? Check one. Fr. Soph. Jr. Sr. Grad.

What is your projected semester of graduation? _____

Will you be registered as a full-time student both semesters of the 2009-2010 academic year? Check one. Y N
If not, what are your plans? _____

**PLEASE RETURN THIS FORM TO THE MUSIC OFFICE BY
5 P.M. ON FEBRUARY 27th, 2009.**

Thank You.

xc: Student file