



**ARIZONA BAND BOOSTERS**

**Marching Band Scholarship Application**

**Expendable Fund Form 102**

**For ABB Use Only**

Amount \$ \_\_\_\_\_

Date \_\_\_\_\_

Sequence \_\_\_\_\_

With this application, enclose a letter explaining your need for a scholarship. We will evaluate your need against other applicants, so please be specific including "Why you?". Discuss your needs with your Reference noted below before sending your completed request. Our regular scholarship grant is \$ 500.00 awarded first semester, but a lesser amount may be awarded depending on available funds.

**Required Reference**

You will need to have a "letter of reference" from your current band director. Enclose it with this application to the address given below: It must be received no later than November 1<sup>st</sup> of the First Semester of an Academic Year

**Required Information**

1. Name : \_\_\_\_\_ 2. Date of Birth \_\_\_\_\_

3. Social Security # \_\_\_\_\_ 4. Home Phone (\_\_\_\_\_) \_\_\_\_\_ State of \_\_\_\_\_  
5. Legal Residence \_\_\_\_\_

6. E-Mail Address \_\_\_\_\_

7. Permanent Address \_\_\_\_\_

8-10. City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

11. College \_\_\_\_\_ 12. Major \_\_\_\_\_

13. Tucson Phone \_\_\_\_\_ 14. Class  F  S  J  Sr  Gr  Circle \_\_\_\_\_ 15. Instrument \_\_\_\_\_

I hereby certify that I am enrolled in the UA Marching Band or will be in the upcoming semester,

Student Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Enclose the following: 1) Your letter, 2) Letter of recommendation, and 3) This Application**

Mail **1), 2) and 3)** to  
UA Office of Std. Fin Aid, Admin Bldg #208  
C/O Arizona Band Boosters Scholarship  
P.O. Box 210066  
Tucson, Arizona 85721-0066

Enclose ALL three items  
- application will not be  
Considered if incomplete.

**ATTENTION:** If this application is approved, you will receive a letter from the Arizona Office of Scholarships and Financial Aid which will inform you of the awarded Scholarship and how it is activated. This is based on you meeting all requirements and are awarded said.

**ABBA Action**

This application has been reviewed by the Ways and Means Committee of the Arizona Band Boosters Fund and has been \_\_\_\_\_.

Authorizing  
Signature \_\_\_\_\_

Gary L. Sawyer, Executive Secretary

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount \$ \_\_\_\_\_