



**MICA FLATS GRANGE # 436**  
**MEMORIAL SCHOLARSHIP**  
**Music Scholarship Application**

APPLICANT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ Phone # \_\_\_\_\_

PARENT'S OR GUARDIAN'S NAME \_\_\_\_\_

GRANGE AFFILIATION (Please indicate yourself or the family member who holds  
Membership and his/her relationship to you.) \_\_\_\_\_

CURRENT DUES PAID? Yes No

APPLICANT'S SIGNATURE \_\_\_\_\_

A. Please list your participation in extra-curricular activities:

1. GRANGE: volunteer work, events, fundraisers, etc.

2. Other activities, clubs, etc.

B. Please write a short paragraph about your music interests, intentions, progress and future goals.

C. FINANCIAL NEED

Total number in family \_\_\_\_\_ How many in college, if any? \_\_\_\_\_

Your tuition cost for music education per semester / quarter of study? \_\_\_\_\_

How much do you expect to contribute towards this cost? \_\_\_\_\_

How much do you expect your parents / guardians to contribute? \_\_\_\_\_

D. COLLEGE LEVEL (Attach an unofficial copy of your transcript)

Field / vocation you are pursuing \_\_\_\_\_

Year of college attending \_\_\_\_\_

E. Scholarship funds awarded as a result of this application will be sent directly to the instructor or institution.

Institution / Instructor's name & address \_\_\_\_\_

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\_\_\_\_\_

Your ID #, if needed for tracking your funds \_\_\_\_\_

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Mail application and transcript to:

**Scholarship Committee  
Mica Flats Grange #436  
7465 West Kidd Island Road  
Coeur d'Alene Idaho 83814**

We encourage deadlines of September 01 and January 01, but will accept applications at any time. Our policy is to award \$50 per semester and up to \$100 per family per year.