

MUSIC

Norwell Arts for Life Scholarship - Student Information Form

Please type or print Student Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ E-mail: _____

SCHOOL ACTIVITIES: List clubs, organizations, committees, offices held or sports.

Grade	Club, Organization, Committee, etc.	Office(s) Held or Sport
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ACADEMIC AWARDS: List awards earned by grade level, by subject, from school/clubs or private organizations, and Honor Roll recognition.

Grade	Award, Honor Roll Recognition, Special Recognition
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_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

COMMUNITY SERVICE: List any art projects or other community service you have been

involved in at NHS.

Norwell Arts for Life Music Scholarship - Release Form

Norwell Arts shall have the right to reproduce, exhibit, and otherwise use the submitted work, in whole or in part, in any manner whatsoever in all media without limitations.

Artist Name (please print): _____

Signature: _____ Date: _____

A parent/guardian must sign the release if the applicant is under eighteen. (Please print)

Parent/Guardian Name: _____

Relationship to applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

The release is entered into with my agreement and consent.

Parent/Guardian Signature: _____ Date: _____

Norwell Arts

PO Box 117 ▪ Norwell, MA 0206 ▪ www.norwellarts.org

Norwell Arts for Life Scholarship - Teacher Comments Page

Due Date: March 19, 2024

Student Name: _____

Submitted Artwork Title/Description: _____

Dear Teacher,

The student above is applying for the **Norwell Arts for Life Music Scholarship**. Please provide some comments on the student's successes, creative process, impact on your class or yourself, the work submitted, or any other information you might find helpful for us to consider as we make our determination. You are welcome to fill in the form below or staple your comments to this sheet and return it to the guidance office in the envelope provided. Thank you for your assistance.

Teacher Comments:

Teacher Signature and date:
