

# Application Form for the New York Viola Society's Rosemary Glyde Scholarships – Spring 2010

## The Rosemary Glyde Scholarships:

The New York Viola Society's Rosemary Glyde Scholarship Program offers Scholarships for students in the New York metropolitan area or who are students of New York Viola Society members. The amount of a Scholarship is \$500. The Scholarship Committee may also give special awards to younger students in the early stages of viola study.

NYVS will choose recipients of Scholarships based on the application materials submitted to NYVS. Our decisions are final, and the student, and parents, in applying for a Scholarship agree to accept the decision of NYVS.

**Age Requirement:** To be eligible for a Scholarship, a student must be under the age of 19 as of July 1, 2010. Students who received a regular Scholarship in 2008 or 2009 are not eligible for a 2010 Scholarship.

## **Application Requirements**

All three parts of this application must be completed:

1. **Part One** requests information about the Student and his or her studies. This part includes a short essay.
2. **Part Two** is to be completed by the Student's parent or legal guardian. It includes a release permitting NYVS to use certain information about the Student in its publicity. (Examples are available on our website: [www.nyvs.org](http://www.nyvs.org).)
3. **Part Three - Recording:** Applicants must submit a **brief recording (CD recommended)** of their playing. Recordings should not be longer than 12 minutes. The recording **must** include one major and one minor scale. It must also include 2 pieces, or movements, in contrasting tempos (fast and slow). On longer pieces, please leave out extended tutti sections and, to stay within the time limit, include only exposition and development material.

Applications, including recording, should be submitted to the New York Viola Society, **to be received no later than March 31, 2010**. Recipients of Scholarships will be chosen and notified in early April.

Send Application materials to:

New York Viola Society  
P.O. Box 61, Radio City Station  
New York, NY 10101-0061

Please direct any questions to Ann Roggen at [aroggen@earthlink.net](mailto:aroggen@earthlink.net) or 212-749-5272, or to Rebecca Osborn at 212-496-5588.

***Please print or type your answers. Feel free to attach extra sheets.***

**Part One:**

Name of Student: \_\_\_\_\_

Address:

Telephone Number:

Birthdate:

School you are currently attending:

Grade or Level in school:

Name of Viola Teacher:

Teacher's Address

Teacher's Telephone Number:

Teacher's Email (optional):

How long have you studied the Viola?

What other instruments have you studied or are you studying, and how long have you studied/played them?

What ensembles do you play in (such as orchestras, string quartets or other string ensembles)?

Pieces (including composer's and/or arranger's names) currently being studied and any performed recently (including when and where you performed them):

List the scales and pieces on the accompanying cassette tape or CD (please see requirements for this tape/CD on page 1 of this application):

Scales – Major: \_\_\_\_\_ Minor: \_\_\_\_\_  
Piece 1 (Composer/Title/Movement): \_\_\_\_\_  
Piece 2 (Composer/Title/Movement): \_\_\_\_\_

Any other information about yourself and your viola playing or other musical activities that you would like us to know. Please feel free to attach a resume, publicity bio, press release or any other prepared materials you may have.

Please provide a brief essay telling us why you chose to study the viola and some things you find enjoyable about studying and playing the viola. **Please note:** If you are awarded a Rosemary Glyde Scholarship, this information, including the essay, or a part of it, may be included in publicity announcing the award as well as other NYVS publicity.

**Part Two** (to be completed by the Student's parent or legal guardian):

Name(s) of Parents or Legal Guardian(s): \_\_\_\_\_

I am the parent or legal guardian for \_\_\_\_\_ (the "Student"), who is applying for a Rosemary Glyde Scholarship. I hereby give my permission for the Student to apply for the Scholarship. I have read the information concerning the Scholarship contained in this application, and agree on behalf of myself and the Student to its terms. I also agree that NYVS may use information concerning the Student contained in this application (excluding contact information) in its publicity, and may use photographs taken of the Student and of myself at the time of presentation of the Scholarship.

Name (please print or type): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please indicate your address and telephone number(s), if different from the Student's.