

Spring 2005

Dear Applicant,

Thank you for your interest in the PR Kellerman Foundation. The PR Kellerman Foundation is dedicated to bringing free music lessons to children in the Berkshire Region of Massachusetts. With the support of donors, the foundation is able to sponsor ten students in grades K though 12 who are committed to attending weekly music instruction. Scholarships are awarded based on the financial need, motivation and talent of the individual and run throughout the year. Instruments will be provided to the student on an as need basis.

Enclosed you will find the packet of information needed in order to complete the sponsorship process. The packet includes an application for sponsorship, two referral applications and an essay that must be completed by the student. In order for an applicant to be considered for sponsorship all four components of the packet must be completed and returned to:

PR Kellerman Foundation PO Box 268 South Egremont, MA 01258

Thank You,

The PR Kellerman Foundation



Application for Sponsorship

Date	
Student Name	Phone Number
Address	Age
	Previous Instruction?
Instrument Played?	Group? Individual?
	Family Information
Parent/Guardian Name	
Address	
Can you transport your child to lesson	s?
	Financial Information
Parent(s) Occupation	
Gross Annual Household Income (inc	luding child support)
Unusual Expenses (Medical, Disaster e	etc)
-	
Signature	Date



Referral Application

Student Name	Date		
Addresss			
Phone			
Age/Grade/School (as of this Fall Year)			
Previous Instruction(Years)	Group?	Individual?	
Instrument Played?			
Ref	ferring Individual		
Music Teach	er or Adult (pleas	se circle)	
Name		Date	
Addresss			
Phone			
School or Affiliation			
What has been your experience with the appand talent. Use back of this sheet, if necessar		mment on applicant's mot	ivation level
			-
Signature	Dat	e	

^{*}You may return this application to the applicant or you may mail it separately to: PR Kellerman Foundation, PO Box 268, South Egremont, MA 01258



Referral Application

Student Name	Date		
Addresss			
Phone	-		
Age/Grade/School (as of this Fall Yea	r)		
Previous Instruction(Years)	Group?	Individual?	
Instrument Played?			
	Referring Individual		
Music	c Teacher or Adult (please	e circle)	
Name	Date		
Addresss			
Phone	-		
School or Affiliation			_
What has been your experience with the and talent. Use back of this sheet, if no	11	ment on applicant's mo	tivation level
Signature	Date		

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Student Application for Sponsorship

Date		
Why is music important to you?		
	1 1.6.2	
How do you think music and the playing of music can enri	ch your life!	
Student Name (Print)	Signature	

^{*} Each answer should be min. of 50 words. Please use back of this sheet, if necessary. Answers should be the work of the student.