



STUDENT APPLICATION FORM • 2012 (Page 1 of 2)

**NEW YORK SUMMER
MUSIC FESTIVAL
PO BOX 947
ONEONTA, NY
13820**

**PHONE
(607) 267.4024**

**FAX
(888) 632.3221**

**EMAIL
INFO@NYSMF.ORG**

**WEB
WWW.NYSMF.ORG**

PLEASE PRINT CLEARLY — USE ALL CAPITAL LETTERS

Name (first) _____ (middle) _____ (last) _____

Address (street) _____ (apt #) _____

(city) _____ (state) _____ (zip) _____

E-Mail _____ @ _____

PLEASE ENSURE YOUR EMAIL ADDRESS IS CORRECT — ALL COMMUNICATIONS WILL BE SENT VIA EMAIL

Home Phone (____) _____ Birth date ____ / ____ / ____ Gender M F

Mobile Phone (____) _____ Grade in Fall 2012 _____

Fax (____) _____ Age in Fall 2012 _____

School Name _____ Address _____

Type of school: Public Private Parochial Home Schooled

Applicant normally lives with: Father Mother Both Other _____

Father or Guardian _____ Mother or Guardian _____

Name _____ Name _____

Address _____ Address _____

Home Phone (____) _____ Home Phone (____) _____

Work Phone (____) _____ Work Phone (____) _____

Mobile Phone (____) _____ Mobile Phone (____) _____

Fax (____) _____ Fax (____) _____

E-Mail _____ @ _____ E-Mail _____ @ _____

PLEASE ENSURE YOUR EMAIL ADDRESS IS CORRECT — ALL COMMUNICATIONS WILL BE SENT VIA EMAIL

Primary Instrument (circle below) No. of Years Played _____ Jazz? Y N

Violin	Viola	Cello	Double Bass	Flute	Oboe	English Horn	Clarinet
Bassoon	Saxophone	Trumpet	Trombone	Euphonium	Horn	Tuba	Percussion
Drum Set	Piano	Guitar	Harp	Voice	Other _____		

Secondary Instrument (circle all below) No. of Years Played _____ Jazz? Y N

Violin	Viola	Cello	Double Bass	Flute	Oboe	English Horn	Clarinet
Bassoon	Saxophone	Trumpet	Trombone	Euphonium	Horn	Tuba	Percussion
Drum Set	Piano	Guitar	Harp	Voice	Other _____		

In which musical ensembles have you participated?

- Choir/Chorus Madrigal Choir Jazz Choir Jazz Band
 Orchestra Chamber Orchestra Wind Ensemble Band

Have you participated in any state, local, or other honors ensembles? If so, please list below.

Please list other summer music programs you have attended.

2011 _____

2010 _____

How did you hear of the New York Summer Music Festival?

- Returning Student (Year) _____ Internet (Site) _____
 Friend/Family (Name) _____ Teacher/School (Name) _____
 Conference (Name) _____ Poster/Advertisement (Name) _____

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Session(s) you plan to attend (please check all that apply):

- | | | |
|--|--|--|
| <input type="checkbox"/> Session I (Jun 24 – Jul 7) | <input type="checkbox"/> Session II (Jul 8 – Jul 21) | <input type="checkbox"/> Session III (Jul 22 – Aug 4) |
| <input type="checkbox"/> Composition Program | <input type="checkbox"/> Composition Program | <input type="checkbox"/> Composition Program |
| <input type="checkbox"/> Classical Saxophone Institute | <input type="checkbox"/> Classical Guitar Institute | <input type="checkbox"/> International Flute Institute |
| <input type="checkbox"/> Pro Tools Certification | <small>*Additional fees and/or application materials required for all Institutes and Composition Program</small> | |

Application Fee (non-refundable)	Before May 15	<input type="checkbox"/> \$ 75
	After May 15	<input type="checkbox"/> \$ 100
Tuition	2-Week Resident	<input type="checkbox"/> \$ 1,800
	4-Week Resident	<input type="checkbox"/> \$ 3,400
	6-Week Resident	<input type="checkbox"/> \$ 4,900
<small>Day Student/Local Resident Scholarship rates available – email admin@nysmf.org</small>		
Special Program/Institute Tuition	Composition Program (\$250/session)	<input type="checkbox"/> \$ _____
	Classical Saxophone Institute (\$250)	<input type="checkbox"/> \$ 250
	Classical Guitar Institute (\$250)	<input type="checkbox"/> \$ 250
	ProTools Certification (\$400)	<input type="checkbox"/> \$ 400
	International Flute Institute (\$1,400)	<input type="checkbox"/> \$ 1,400
Activity Fee (required: \$50/session)	1 session/\$50; 2 sessions/\$100; 3 sessions/\$150	<input type="checkbox"/> \$ _____
Private Lesson Fee (optional: \$75 per hour • \$40 per 1/2 hour)		
Instrument	Classical Jazz No. of hours No. of 1/2 hours	
_____	<input type="checkbox"/> <input type="checkbox"/> _____ _____	<input type="checkbox"/> \$ _____
_____	<input type="checkbox"/> <input type="checkbox"/> _____ _____	<input type="checkbox"/> \$ _____
_____	<input type="checkbox"/> <input type="checkbox"/> _____ _____	<input type="checkbox"/> \$ _____
Festival Bank Deposit (optional: students may withdraw cash daily)		<input type="checkbox"/> \$ _____
Instrument Rental (\$50/week)	Instrument _____	<input type="checkbox"/> \$ _____
<small>(Double Bass, Harp, etc. available for additional fee)</small>	No. of Weeks _____	
TOTAL AMOUNT DUE		\$ _____

- You will be notified of your acceptance via email. Please make sure your email addresses on page 1 of this application are correct and legible.
- Please make all checks payable to NYSMF.
- Upon acceptance, a non-refundable \$400 tuition deposit is due (will be applied towards tuition).
- All balances are due in full by May 15, 2012. Personal checks will not be accepted after this date.
- Registration after May 15, 2012 must include payment in full by money order or certified check.
- Applications sent without an application fee will not be processed.
- For your convenience, NYSMF accepts credit card payments.

Credit Card Information

PLEASE INCLUDE ALL REQUIRED INFORMATION TO ENSURE SUCCESSFUL PROCESSING

- Visa MasterCard Discover American Express

Cardholder Name _____

Address _____

Card No. _____ Exp. Date ____ / _____

Card Security No. _____ Amount: \$ _____

Please ensure your email address is complete, correct, and legible. All NYSMF correspondence is sent via email.

If admitted, I agree to abide by the rules of the New York Summer Music Festival and supply necessary forms as requested. I understand that no deductions or refunds will be made for late arrival, early departure, or expulsion for disciplinary reasons.

_____/_____/_____
Applicant's Signature Date

_____/_____/_____
Parent / Guardian Signature Date



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TEACHER RECOMMENDATION FORM • 2012

Student's Name _____ Date ____ / ____ / _____

The individual listed above is applying for admission to the New York Summer Music Festival (NYSMF). A recommendation is required for admission to the Festival. Please return this completed form to the student, or mail/fax/email it directly to the Festival at application@nysmf.org. General recommendation letters based on this form are also acceptable. If you require more information about our program, please visit our website (www.nysmf.org) or contact us for a copy of our brochure. Thank you for your assistance.

Teacher's Signature _____ Date ____ / ____ / _____

Teacher's Name _____

Address _____

City _____ State _____ Zip Code _____

Phone (____) _____ E-Mail _____

School Name _____

Address _____

• How long have you known the student? _____ YRS

• What is your relationship to the student?

Music Teacher Ensemble Conductor Private Lesson Teacher Other _____

Musical Ability	Superior	Excellent	Good	Fair	Weak	N/A
Basic Talent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technique	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rhythmic Sense	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Musicality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intonation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sight Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Personal Qualities	Superior	Excellent	Good	Fair	Weak	N/A
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments

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(please continue on back if needed)



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FINANCIAL AID/SCHOLARSHIP FORM + 2012

If applying for aid, this form must accompany the application form. The NYSMF Financial Aid/Scholarship application is NOT required for application to the festival.

A limited number of scholarships/financial aid packages are available, and will be awarded to students based on need and/or merit. Applications received after the deadline will only be considered based on availability. All applications must be accompanied by copies of the parent(s) or guardian(s) most recently submitted IRS tax returns and W-2 income forms. (Please include copies of each parent's/guardian's tax forms if filed separately. If tax returns were not filed, please submit adequate proof of income, i.e. W-2, 1099, year-end paystubs, etc.) Failure to provide all of the required information and income documentation will disqualify consideration for Financial Aid and Scholarship Assistance.

Financial Aid/Scholarship Applicant Checklist:

- Student application Recommendation form W-2 or other tax document
 CD recording (1-2 movements of a concerto or short pieces of contrasting styles)

Applicant's Name _____

Please complete this information for the parent(s) with whom you are living:

Mother's Name _____ Father's Name _____

Title/Occupation _____ Title/Occupation _____

Employer _____ Employer _____

Annual Salary _____ Annual Salary _____

Financial Information

Parent/Guardian Assets	Current Value	Amount Owed	Annual Payment
Cash, savings and checking accounts	\$ _____	N/A	N/A
Investments (stocks, CDs, money market accounts, etc.)	\$ _____	N/A	N/A
Home (renters: enter monthly rent amount)	\$ _____	\$ _____	\$ _____
Business and/or Farm	\$ _____	N/A	N/A

If parent(s) own a home, in what year was it purchased? _____

What was the purchase price? \$ _____

Number of immediate family members under age 18: _____

Number of siblings in college: _____

Annual contribution towards education, if any:
(college or private school tuition) \$ _____

Financial Aid received? \$ _____

I hereby affirm that all of the information submitted for my New York Summer Music Festival Scholarship and Financial Aid Application is true and accurate to the best of my knowledge. I understand that if I am awarded a scholarship or financial aid, and choose to attend, I will be responsible for paying any additional program fees, cost of course materials, private lesson fees, travel expenses and personal needs.

_____/_____/_____
Applicant's Signature Date

_____/_____/_____
Parent / Guardian Signature Date

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