

ABILENE SUMMER MUSIC FESTIVAL 2011 SCHOLARSHIP RECOMMENDATION FORM

All forms (registration, scholarship, recommendation) are due by May 6, 2011.

Address: Abilene Summer Music Festival, HSU Box 16230, Abilene, TX 79698

Email: asmf@hsutx.edu Phone: 325.671.2171

Applicant's Name _____

Grade _____ Age _____ School _____ Instrument _____

Your Name _____ Job Title _____ Phone _____

Please indicate how long and in what capacity you have known the applicant.

Musical Skills- Please rank the applicant in each of the following musical qualities below

Talent	Poor	Fair	Good	Superior
Pitch Sense	Poor	Fair	Good	Superior
Rhythmic Sense	Poor	Fair	Good	Superior
Musical Memory	Poor	Fair	Good	Superior
Sight Reading	Poor	Fair	Good	Superior
Potential	Poor	Fair	Good	Superior

Character Evaluation. Please rank using a scale of 1-5, by checking the number that best describes the student

	Fair		Good		Excellent
Poise and Manner	1	2	3	4	5
Industry and Responsibility	1	2	3	4	5
Judgment and Common Sense	1	2	3	4	5
Cooperativeness	1	2	3	4	5
Initiative and Imagination	1	2	3	4	5
Leadership	1	2	3	4	5
Personality	1	2	3	4	5
Emotional Stability	1	2	3	4	5
Sociability	1	2	3	4	5
Drive and Determination	1	2	3	4	5
Maturity According to Age	1	2	3	4	5
Work Ethics	1	2	3	4	5

Additional Comments. Use this space for any additional comments in support of the applicant.

Financial Need (if applicable). Please describe the financial need of the applicant (write on back).