

SINGLE STUDIES APPLICATION FORM

PERSONAL DETAILS

Applicant's given name: _____ Surname: _____

Date of birth: ____/____/____ Gender: Male Female

Postal address: _____

Home address: _____

Email address: _____

Phone number: *Home* _____ *Work* _____ *Mobile* _____

Are you an international student? Yes
 No

ACADEMIC BACKGROUND

Applicant's School: _____ Applicant's year level at school: _____

If you have completed any AMEB examinations please specify the highest level attained: _____
(Please attach copies of certificates if applicable)

Applicant's instrument (tick one specialisation and one instrument): Classical Jazz

- | | | | | |
|--------------------------------------|-----------------------------------|--------------------------------------|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Violin | <input type="checkbox"/> Flute | <input type="checkbox"/> Trumpet | <input type="checkbox"/> Voice | <input type="checkbox"/> Drums |
| <input type="checkbox"/> Viola | <input type="checkbox"/> Clarinet | <input type="checkbox"/> Trombone | <input type="checkbox"/> Guitar | <input type="checkbox"/> Saxophone |
| <input type="checkbox"/> Cello | <input type="checkbox"/> Oboe | <input type="checkbox"/> Tuba | <input type="checkbox"/> Piano | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Double Bass | <input type="checkbox"/> Bassoon | <input type="checkbox"/> French Horn | <input type="checkbox"/> Percussion | |

Would you like to be considered for a scholarship? Yes (Subject to availability and awarded at the discretion of the Director.)
 No

Do you intend on enrolling in a degree program at The Elder Conservatorium of Music in future? Yes
 No

Signature: _____ Date: _____
(To be signed by parent/guardian if applicant is under 18 years of age)