



OREGON
MUSIC TEACHERS
ASSOCIATION

BETTY BALMER MEMORIAL MUSIC STUDY GRANT
APPLICATION

Instrument or Voice _____ Date _____

Applicant's Name _____ Age _____

Parent or Guardian's Name _____

Address _____

City _____ State _____ Zip _____

Teacher's Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Teacher Email _____

Member of _____ district.

Length of study with this teacher _____

Requesting assistance for _____ months of study.

_____ Total estimated cost for lessons, materials, and event fees during the period applied for

_____ % of this cost to be paid by the Student

_____ % of this cost to be paid by the Teacher

_____ % of this cost to be paid by the Grant

_____ Total amount applied for

THIS IS A NON-AUDITION GRANT

This strictly confidential application will be evaluated by the OMTA Education Grant Chair and/or Committee. There is no application fee for this grant. Student must be studying with a member of OMTA.

Continued on next page...

On this page, please provide all pertinent information about the applicant including the following: ***Incomplete applications will not be considered.***

- Student's musical ability, commitment to practicing diligently and to continuing lessons throughout their schooling years
- Syllabus level, awards, honors, awards and honors with other instruments or voice
- Other musical participation
- Teacher's evaluation of financial need
- Musical community involvement

Deadline: September 30

Return to: Laura Davis, OMTA Education Chair
12877 SE Braemark Pl
Clackamas, OR 97015
(503) 312-1162
lauradavis47@gmail.com

Write about your student below. Use additional pages as necessary.

