

Angelina's Song

Scholarship Fund Program Guidelines

Angelina's Song is committed to advocating for music therapy programs, provides grants to children's hospitals to support music therapy, and annually contributes to the National Pediatric Cancer Foundation for research. Angelina's Song established its scholarship program to help students pursue a course of study in Music Therapy program at an approved, accredited higher educational institution.

Scholarship recipients will receive \$5,000 to support their 2024/2025 academic school year. Funds will be paid directly to the school and applied to tuition or expenses. All recipients can apply to renew their scholarship for up to four (4) consecutive years of Music Therapy study at an approved school. Renewal will be dependent on sustained GPA and updated essay and letter requirements. The fund intends to offer a scholarship each year to a first-time applicant while accepting renewals for past recipients who qualify.

Scholarship funds will be awarded to the student upon evidence of registration in an AMTA-approved, accredited higher educational institution.

Criteria and Eligibility for First-Time Applicants and Returning Recipients

- Applicant must pursue a degree in Music Therapy at an AMTA-approved college or university.
- Applicant must have at least a 3.0 grade point average.
- Applicant must demonstrate a passion for music therapy and community involvement.
- Applicants must be available for a remote scholarship interview during June and July 2024.
- Applicants must be willing to attend local Angelina's Song events and potentially share their passion with attendees.

Criteria and Eligibility for Returning Recipients

- The applicant must have received the Angelina's Song Scholarship the previous year.

General Instructions

- The deadline for scholarship applications is May 31, 2024, at 5 p.m. The application and all accompanying items must be emailed to Scholarship@AngelinasSong.org. Once your application is received, you will receive a confirmation email acknowledging the submission.
- Please refer to the "Application Process" for a list of the required supporting documents. Only complete applications will be considered.
- Type or print legibly. Illegible applications will not be considered.
- All communication, including requests for information and interview dates, will be via the email provided in the application.

Application Process

Applicants must submit the following items to Scholarship@AngelinasSong.org by May 31, 2024.

- **Completed application form:** If handwritten, please print legibly.
- **Two (2) letters of recommendation:** Recommendations may be from professors, teachers, administrators, counselors, employers, or individuals with significant knowledge of the applicant's experience and involvement.
- **Official and recent school transcript:** Must state cumulative grade point average (GPA).
- **Personal essay:** The essay should be 1-2 typed pages and contain no grammatical errors. The essay should address:
 - **First-Time Applicants:** What are your educational goals, professional goals, and objectives, and why?
 - **Returning Applicants:** How has attending higher education for Music Therapy impacted your life?

Applicants selected to proceed to interviews with the Scholarship Committee will be contacted via email by July 1, 2024, at the latest. Interviews will be scheduled at a mutually agreed-upon time and conducted via video call.

The 2024/2025 Angelina's Song Scholarship recipient will be selected by July 31, 2024, and notified via email the first week of August 2024. Disbursement of scholarship funds will follow as soon as the recipient's school details are confirmed. Completed Angelina's Song Scholarship Forms and supporting documentation may be submitted by mail or email. Please direct all questions regarding Angelina's Song to Maria Latulippe.

Email: Scholarship@AngelinasSong.org

Address: 66 Mall Parkway, Muncy, PA 17756

Phone: 570-220.4413

Angelina's Song

Scholarship Fund Application

Grant Deadline: 5 p.m. on May 31, 2024 **Selection Notification:** August 2024

Please type or print your answers. If the application is illegible, it will be returned.

Please select one: First-Time Applicant Returning Recipient **Date of Birth:** _____ (Month, Day, Year)

First Name: _____ **Last Name:** _____

Mailing Address: _____

City: _____ **State** _____ **Zip:** _____

Telephone: _____ **Email:** _____

Are you related to any Angelina's Song Board Members or staff? Yes No

Current High School, College, or University: _____ **Years Attended:** _____

I will be attending the following school in **Fall of 2024:** _____

*Proof of acceptance or current student enrollment from the above school is **required prior to funds being released to the college or university.***

I will be entering the above-mentioned school as a: Freshman Sophomore Junior Senior

Grade Point Average (GPA): _____ (4.0 Scale) *Please attach proof of GPA. Your most recent, official school transcript is required.*

Academic honors, awards, and membership activities (additional space provided on last page): _____

Hobbies, outside interests, extracurricular activities (additional space provided on last page): _____

School-sponsored and external volunteer activities in the community (additional space provided on last page): _____

Estimated annual costs for the academic year: *Describe below under comments.*

Tuition: \$ _____ Room and Board: \$ _____

Books: \$ _____ Other Expenses: \$ _____

Additional Financial Assistance you have Applied for and Awarded: *Describe below under comments.*

Personal: \$ _____ Other Scholarships: \$ _____

Grants: \$ _____ Student Loan(s): \$ _____

Other Financial Resources: \$ _____

Is there anything else you want us to know about you? _____

Additional Space for Comments: _____

Statement of Accuracy

I confirm that all the above-stated information I provided is true and correct to the best of my knowledge. I also consent to my picture being taken and used for any purpose necessary to promote Angelina's Song Foundation.

I understand that if chosen as a scholarship recipient, I must provide evidence of enrollment or registration at the post-secondary institution before scholarship funds can be awarded.

Signature of Applicant: _____

Date: _____