West Virginia University
School of Music

UNDERGRADUATE MUSIC SCHOLARSHIP REQUEST APPLICATION

This form is for current School of Music students who wish to be considered for a new School of Music scholarship **or** to request an increase in an existing School of Music scholarship.

HOME ADDRESS	**SCHOOL ADDRESS**
Mailing Address:	Mailing Address
City, State, Zip:	City, State, Zip:
Phone:	Phone:
Personal Email:	MIX Email:
SCHOLARSHIP INFORMATION	
Expected Graduation Date:	Current GPA:
Instrument:	Applied Instructor:
Major (check one): ☐ Performance ☐ Therapy ☐ Composition ☐ Music Education ☐ BS in Music & Health	☐ Music Business & Industry (Multi) ☐ Music Business & Industry (Applied) ☐ BA in Music ☐ Commercial Music/Jazz
Advisor:	
Please list scholarship/assistance currently receiving from School of Music and WVU Financial Aid Office:	
Please list the performance activities and ensembles in which you have participated:	
Are you a Promise Scholar: ☐ yes ☐ no	Are you a WV resident? ☐ yes ☐ no
Applicant Signature: *My signature verifies that I believe I am currently meeting the terms of the Music Scholarship Award Agreement.*	
Today's Date:	
FACULTY ENDORSEMENT	
This section must be completed by the student's current studio teacher and submitted directly to the Scholarship Chair. All remarks and recommendations will be confidential. All new awards are subject to the availability of funds. **PLEASE SUBMIT COMPLETED FORM TO CYNTHIA ANDERSON VIA EMAIL OR PLACE IN MAILBOX.**	
Given what I know of the musical and scholastic merits of the student within my own area: ☐ I do not support this student's request ☐ I recommend this student for a cash scholarship	
Faculty Name:	
Faculty Signature:	
Today's Date:	
Faculty Comments:	
OFFICE USE ONLY:	
Date Received:	
Award Amount:	

Updated: 6/18/2026 MLJ