Plano Symphony Education Scholarship Program

Director Referral

(Please complete form in black ink only)
Incomplete applications may not be considered.

Student Name: ________________________________________________

Plano ISD Middle School: ________________________________

Current Grade: 6 or 7 (circle one)  Primary Instrument: ____________

Student E-mail: ________________________________________________

Band or Orchestra Director Name: ________________________________

Referral Statement: (The Plano Symphony Orchestra is looking for a student with financial need and demonstrated music potential who is not currently taking private lessons and whose success would be greatly enhanced by such an experience. Your inputs regarding this particular student is an important part of the decision making. Please be specific)

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