

# Scholarship Audition Form

Snead State Community College Maze  
Music Bldg.  
102 Elder Street Boaz,  
AL 35957  
(256) 840-4145

## Audition Dates:

Scholarship Audition Dates have been set for the week of March 3<sup>rd</sup> – 5th this year. Appointments can be made at the mutual convenience of the student and faculty. Please contact the appropriate faculty member well in advance of your intended audition date for scheduling. A completed application form should come with you to the audition or be emailed to the appropriate faculty member in advance. Contact information for each is below:

Voice	Piano	Guitar	Instrumental
Dr. Barbara Hudson <a href="mailto:bhudson@snead.edu">bhudson@snead.edu</a> (256) 840-4147	Dr. Steven DiBlasi <a href="mailto:sdiblasi@snead.edu">sdiblasi@snead.edu</a> (256) 840-4145	Mr. John Dechiaro <a href="mailto:jdechiaro60@gmail.com">jdechiaro60@gmail.com</a> (318)-229-7631	Mr. Michael McGee <a href="mailto:mike.mcgee@snead.edu">mike.mcgee@snead.edu</a> (256) 840-4148

Please **type** or **print** clearly:

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_  
*(street and number)* *(city, state, zip code)*

High School: \_\_\_\_\_  
*(name)* *(city, state)*

Graduation Date: \_\_\_\_\_ Current GPA: \_\_\_\_\_ SAT/ACT score: \_\_\_\_\_

Please list all honors, achievements, and relevant activities throughout your academic career:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you applied for admission to Snead State Community College?  Yes  No

Have you been admitted to Snead State?  Yes  No

I will be enrolling as:  New Freshman  Transfer  Reentering

Will you be commuting to campus?  Yes  No

If not, will you be living on campus?  Yes  No      In an apartment?  Yes  No

Other college(s) attended: \_\_\_\_\_ Dates: \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Hours Earned: \_\_\_\_\_ GPA \_\_\_\_\_

2

Intended Major: \_\_\_\_\_

Principal instrument or voice classification (S, A, T, B): \_\_\_\_\_

Private Instructor / Director: \_\_\_\_\_

Please list any other instruments you play \_\_\_\_\_

Career Plans (if known):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

References:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*By signing below I agree that all information provided on this form is true and correct to the best of my knowledge.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed