



John Walter Cape Community Band

The Community Concert Band of Cape May County, New Jersey

The John Walter Cape Community Band – Music Scholarship Guidelines

General Information:

The John Walter Cape Community Band (JWCCB) is a non-profit organization [501-C-3]. Our Mission is to foster and promote the social, intellectual and musical welfare, education and skill of our members and to bring music to the community. Our band plays a variety of musical styles including marches, Broadway and movie show arrangements, classical, pop tunes, big band and jazz ... and we perform public concerts all year long throughout Southern New Jersey.

The JWCCB is awarding a 2017 scholarship to a deserving student living in Cape May County who is presently involved in any music related discipline.

Application Requirements:

- Be a high school senior residing in Cape May County at the time of award
- Have a “C” average or better (confirmed by school records)
- Complete and submit an application on or before May 19, 2017, including an official school transcript, music history and recommendations from school or private teacher.

The Scholarship Committee: Will consider any or all of the following ...

- Music background and accomplishments
- Performed or rehearsed with the JWCCB (Not essential)
- Recommendations of school music or performing arts department and/or private teacher
- Evidence of enrollment in an accredited program/school beyond secondary level
- Scholastic record
- Need

When to Apply:

Applications must be received by JWCCB at least two weeks prior to graduation or before May 19, 2017, whatever is first. Applications received after this date will not be considered. Amount and number of Awards is determined each year and is based on availability of funds to support the Scholarship program. Payment will be made directly to the student.

How to Apply:

You can request a copy of the JWCCB Guidelines and Application from your music teacher or Guidance Counselor ... or; visit www.johnwalterband.org and download a copy ... or; call 215 630-9414 and receive a copy via email. Return the Application form, school transcripts and Teacher’s Recommendation to:

John Walter Cape Community Band
PO Box 1631
Wildwood, NJ 08260
Attention: Scholarship Committee



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Application for the John Walter Cape Community Band 2017 Scholarship Program

(Please type or print clearly—all information must be completed)

Applicant's full name: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail Address: _____

Parent's/Guardian's Names: _____

High School: _____ Graduation Date: _____

High School Counselor's Name: _____ Phone No: _____

Grade point average: _____ (provide official transcript) Class Rank: _____ of _____

Please estimate the number of times you have rehearsed or performed with the John Walter Cape Community Band: _____ rehearsals/concerts Years from 20__ to 20__

Indicate each musical instrument played or vocal aptitude (SATB) and rate your ability where 1 is beginner and 5 is outstanding for your age group. Attached additional pages if necessary:

Rating: _____

Rating: _____

Rating: _____

Indicate school and music awards received and any other musical achievements and scholarships. Include regional band, orchestra, choir, etc. Attach additional pages if necessary:

Indicate what musical organizations you have belonged to or currently belong to and the corresponding dates. Attach additional pages if necessary:

From _____ To _____

From _____ To _____

From _____ To _____

What school or college do you plan to attend after graduation: _____

Applicant's Signature: _____

Parent or Guardian: _____ Date: _____



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Please feel free to include additional pages if needed. Questions: Contact John Finiello our Scholarship Coordinator at 215 630-9414 or via email: jjfmaf@comcast.net

Music Teacher Recommendation Form

Applicant's full name: _____

The person named above is applying for the John Walter Cape Community Band Music Scholarship Program. Kindly complete the following information regarding the applicant. Describe and rate the applicant's musical talent and potential for success. Describe and rate the applicant as a member of the various school music organizations. Describe and rate the applicant's school citizenship and need for a scholarship.

Comments: _____

Your Name: _____

Signature: _____

Phone: _____

Title/Position: _____

Email: _____

Please return this form and completed application before May 19, 2017

To:

John Walter Cape Community Band

PO Box 1631

2017 SCH 3 rev 1-31



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Wildwood, NJ 08260

Attn: Scholarship Committee

2017 SCH 4 rev 1-31