



Music Department
 1400 College Drive
 Waco, TX 76708
 (254) 299-8283
 FAX (254) 299-8242

MUSIC SCHOLARSHIP RECOMMENDATION FORM

Instructions to Student: Fill out this entire section, then give this form and a stamped envelope (addressed to the MCC Music Department, 1400 College Drive, Waco, TX 76708) to the person from whom you are requesting a recommendation. Ask them to complete and mail or fax the form as soon as possible. Only recommendations given on this official form are acceptable to the Music Department.

Applicant's Name: _____
First Name Middle Initial Last Name

Phone Number: _____ E-mail address: _____

Auditioning for: (check one) Choir Band Commercial Music ensembles Piano

Primary Instrument/Voice part: _____ Secondary Instrument (if any): _____

I hereby waive my right to see this recommendation letter. (check one) Yes No

Student Signature: _____ Date: _____

Instructions to Reference: Thank you for taking time to provide this information. Once completed, please send this form to the MCC Music Department by mail or fax – do not return it to the requesting applicant. This information will be kept in the applicant's confidential file. Do not fill out this form if the student has not completed and signed the above box.

How long and in what capacity have you known this applicant? _____

TRAIT	Exemplary	Above Average	Average	Below Average	TRAIT	Exemplary	Above Average	Average	Below Average
Reliability					Group Commitment				
Punctuality					Practice Habits				
Leadership					Natural/Inborn Music Talent				
Initiative					Developed Music Talent				
Determination/Perseverance					Academic Study Habits				

Please make any additional comments regarding this applicant (use back of form if necessary):

Signature: _____ Printed Name: _____

Position: _____ Institution: _____

Date: _____ May MCC contact you for further input about this applicant? Yes No

Phone: _____ E-mail: _____