

**Greater Bridgeport Youth Orchestras 2017-18
KUBTEC Bob & Dorothy Genualdi Scholarship
Application**

DUE SEPTEMBER 16, 2017

Student's Name _____ Grade in school _____

Instrument _____ 2017-18 Ensemble _____ # Years in GBYO _____

Address _____

Parent Email _____

Parent's Signature _____ Date _____

Please answer the questions below carefully. If you need more space, continue your responses on the back or attach another sheet if necessary. Return this form with a *GBYO financial aid application* and a *copy of your most recent tax return* by Sep. 16 to: GBYO, POBox 645, Fairfield, CT06824 OR turn it in at rehearsal.

Why is it important for you to play a musical instrument? (Not to exceed 300 words) _____

Why do you want to be a part of GBYO? (Not to exceed 100 words) _____
