

**DENISON UNIVERSITY
DEPARTMENT OF MUSIC**

**SCHOLARSHIP AUDITION APPLICATION
FOR MAJORS OR MINORS**

Name _____

Address _____

City, State, Zip _____

Performing medium for the audition _____

Number of years of private study in this medium _____

Number of years of performance in this medium _____

Number of years of private study in other media _____

Performance Experience (ensembles, recitals, contests, etc.) _____

Interested in Music Major _____ Music Minor _____

Compositions to be performed (at least two short pieces in contrasting styles):

1. Composer _____ Title _____

2. Composer _____ Title _____

To apply you must audition for the music faculty or send a tape to the Music Department. Please return this completed scholarship application form along with a letter of recommendation from your teacher or band director. Auditions may be scheduled at your convenience by contacting the **Department of Music, Denison University, Granville, OH 43023. Telephone (740) 587-6220.**