

Application Form For
LOCAL PRESIDENTS COMMUNITY SERVICE AWARD
(For Junior High / Middle School)

District: _____ County: _____

Application of: _____

RULES and INSTRUCTIONS

This award is given to a 9th grade student in recognition of his/her leadership, achievements, and service to the community in the field of music during the 7th, 8th, and 9th grades. Special emphasis is placed on musical service to the community which is the essence of the award.

RULES

1. Applicant must be finishing the 9th grade and going into the 10th grade and must be a student of an FSMTA member teacher for at least six months.
2. Applicant must be recommended by his/her FSMTA Member teacher and a music teacher and/or Principal of the student's Middle School or Junior High School.
3. All applications must be in the hands of the Local MTA President or High School Liaison Chairman by March 1st. Send the original and three (3) copies of the application to the FSMTA Community Service Award Chairman.
4. A winner is selected to represent the county by the District Community Service Committee. Districts comprised of more than one county may have a representative for each county. Applications of county winners must be in the hands of the State Chairman by April 1st. The Local MTA sends a fee of \$25.00, payable to FSMTA, which must accompany the application.
5. The selection of the state winner is made by the FSMTA Community Service Committee. The state winner is presented an appropriate plaque and a check for \$200.00 at the FSMTA State Convention in June.

INSTRUCTIONS

1. Please list by music organization and function the community service activities in which you have participated during the 7th, 8th, and 9th grades with the year and date of each activity. (e.g. Community Orchestra, Violin, 1999-2000; Christmas Concert 1999, Community Shopping Mall, Religious Services, etc.)
2. Application must be signed by your Principal, Vice Principal, Music, Band, or Choral Teacher/Director.
3. Type/print and attach to your application an evaluation of your community musical activities, indicating which have been most rewarding and why, and which have helped you develop special abilities and interests.
4. Obtain an unsigned letter of recommendation from your FSMTA member teacher. This letter must not show the name of your teacher. The teacher signs as indicated on the last page of the application.
5. Attach a small (2" X 2") photograph to the application. If you are the state winner, a black and white glossy photo will be required for publication in the FSMTA August newsletter.
6. The application must be completely filled out with dates of activities. Include letters of recommendation, your evaluation, and photo. Use additional sheets to expand the information if needed.

APPLICANT INFORMATION

Name of Applicant: _____ Home Phone: _____

Address: _____ City: _____ Zip: _____

County: _____ District MTA: _____ Local MTA: _____

Name of School: _____

Email address: _____

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MUSICAL SERVICE ACTIVITIES:

Name of School: _____

7th Grade:

8th Grade:

9th Grade:

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MUSICAL COMMUNITY SERVICE ACTIVITIES: (Include your church / synagogue activities if you wish.)

7th Grade:

8th Grade:

9th Grade:

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Piano Teacher's Letter of Recommendation

(Please, do not sign this form.)

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TO: Music-Band-Orchestra-Choral Director and Principals or Vice Principals

The above named student is applying for the Local President's Community Service Award. Any 9th grade student who is currently studying with a Florida State Music Teachers Association member teacher is eligible to apply for this award. The award is given in recognition of the student's leadership, achievements, and service to the community and his/her church or synagogue in the field of music. The award covers activities in the 7th, 8th, and 9th grade of Middle or Junior High School. A winner is selected in each county, and from these, a state winner is selected. The state winner is presented a plaque and a check for \$100.00 at the FSMTA State Convention in June. The award is based on the student's participation in school musical activities, church or synagogue activities, community service activities, and his/her study with an FSMTA Member teacher. Your signature will serve as an endorsement and recommendation for the above named student. You may append your own evaluation or letter of recommendation. Thank you.

Signature: _____

Position: _____

Additional Comments

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Address: _____ Home Phone: _____

City: _____ Zip: _____ Local MTA: _____

Email address: _____

Name of School: _____ Grade Point Average: _____

Awards, Honors, Special Recognitions:

* * * * *

Applicant's Statement

I am at present a student of _____, a member in good standing of
FSMTA, and have studied approximately _____ years with this teacher.

Applicant's Signature: _____

Teacher's Statement

_____ is currently studying with me and has been a student
of mine for approximately _____ years. I am a member in good standing of FSMTA and
recommend this student for the Local Presidents' Community Service Award.

Teacher's Signature: _____

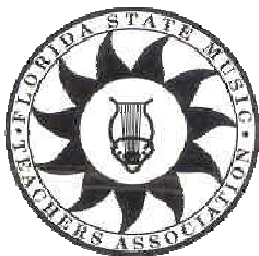
Address: _____

City: _____ Zip: _____ Email: _____

Local MTA: _____ District: _____

*Please Note: The FSMTA Teacher signing this application is also, in effect, signing the letter of
recommendation. **The teacher's name must not be on the letter of recommendation and must not be
known to the adjudicators.***

PERMISSION TO USE PHOTOGRAPH



I give permission for my photograph taken during a Florida State Music Teachers sponsored event to be used on the official FSMTA web-site and/or in the official FSMTA Newsletter.

Name: _____

Address: _____

Contact number: _____

Email address: _____

If the participant is under 18 years old, please give student's date of birth and name/ contact details for parent/guardian:

Student's date of birth: _____

Name of parent/guardian: _____

Contact number for parent: _____

Signature: _____

Parent signature (if applicable): _____

Date: _____

(Must be signed by parent/guardian if individual is under 18 years old)