

YOUNG MUSICIANS' CAMP COMMUNITY SERVICE PROGRAM APPLICATION

TO APPLY:

1. Complete this Application and send it by mail to:

Frost Young Musicians' Camp University of Miami
P.O. Box 248165
Coral Gables, FL 33124-7610

2. After the Camp receives your application, you will be contacted by our Student Activities Director, Ms. Yvette Fojo, for a telephone interview. You will be notified by email if you are accepted into this program. If you are accepted, click "Register Here" on the camp website, complete the online registration form and send in your payment. **Do not register** until you receive an acceptance email!

SESSION *(Check the ones you are available for) The cost for each session is TBA. There is a discount if you sign up for 2 or more sessions. Daily lunch is included for all participants. NOTE: Enrollment is very limited. The deadline to apply is May 1, however participants are accepted in the order that we receive this registration form and a session may fill up before May 1. Applications received after May 1 will be put on a waiting list.*

Session A: June 11 - June 22 **Session B:** July 2 - July 13 **Session C:** July 16 - July 27

PERSONAL DATA *(Please Print)*

Name <i>(last, middle, first):</i>		
Grade <i>(entering in Fall):</i>	Age <i>(current):</i>	
Address: _____ _____		
Participant Cell Phone:	Email:	
Parent Cell Phone:	Email:	
Are you a US citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Race:	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

EDUCATION BACKGROUND

High School:	
College:	Major:
Instrument:	
Instrumental/Vocal Study <i>(Number of years / major teachers/awards & honors):</i> _____ _____ _____	

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Camps attended as a camper: _____ _____

PREVIOUS EMPLOYMENT, COMMUNITY SERVICE OR LEADERSHIP EXPERIENCES

Position	Salary:	Year:
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Employer:

Address:

Contact:	Phone:
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Please list any other relevant leadership or employment experiences below: _____ _____
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Is there any special condition which will enter into your accepting this position?
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Have you been convicted of a crime (<i>including traffic violations</i>) or been imprisoned during the last seven years? (<i>A conviction will not necessarily bar you from employment</i>) if yes, please explain. _____ _____

Have you ever been convicted of a sex-related or child abuse related offense? <input type="checkbox"/> Yes Please explain: _____ _____
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Do you have any physical or mental disability that may limit your performance in this job? <input type="checkbox"/> Yes If yes, what can be done to accommodate you?

REFERENCES:

Please list two (2) educational, professional or references who are familiar with you, can comment on your character, the quality of your work, have worked directly with you, and have known you for at least one year.

Name:	Relationship:	Phone:
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Name:	Relationship:	Phone:
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