

## WMTA Summer Scholarship Program 2025

**AWARD:** \$500, awarded to a maximum of 4 applicants  
**ELIGIBILITY:** Open to students of WMTA members  
**AGE LIMIT:** 12 – 18 years old

### APPLICATION DEADLINE: MAY 15, 2025

Washington Music Teachers' Association (WMTA) is offering a scholarship opportunity for middle or high school students of WMTA members, to be used for music workshops/summer programs in the United States. This Summer Scholarship Program will grant financial assistance to music students, ages 12-18, who wish to experience intensive music study in summer programs. Scholarship winners are encouraged to participate in at least one WMTA in-person or virtual event.

### REQUIREMENTS:

If you are a WMTA member and would like your student to take advantage of this opportunity, please have them submit the following:

- A completed application form
- An essay of minimum 300 words: *"How will this scholarship help me?"*
- An audition video recording of two contrasting pieces. **YouTube** link with *unlisted* format preferred.
- Proof of acceptance to local or sleep-away music workshop or summer music program
- A copy of the applicant's letter of agreement/confirmation with the summer program or copy of payment receipt.
- A recommendation letter from the student's private teacher + a paragraph from an unrelated adult, as a character reference

**Please note: The awardee is ineligible to apply the following year.**

Applications must be either:

- a) Postmarked by May 15, 2025, and mailed to the chair:  
Mary Kading, 8921 Ridge Place, Bethesda, MD 20817  
OR
- b) E-mailed as a PDF to MLKPNO@hotmail.com by 11:59 on May 15, 2025.

**The scholarship awardee will be announced by May 31, 2025.**

**APPLICATION FOR SUMMER SCHOLARSHIP PROGRAM 2025**

Student Name: \_\_\_\_\_

Student Address: \_\_\_\_\_

\_\_\_\_\_

Student E-mail: \_\_\_\_\_

Student Birthdate: \_\_\_\_\_

Parent's name and email: \_\_\_\_\_

WMTA Teacher and email: \_\_\_\_\_

Instrument studied: \_\_\_\_\_ Number of years studied: \_\_\_\_\_

Name and Address of summer program you plan to attend:

\_\_\_\_\_

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Signature of WMTA Teacher

Parent/Guardian's signature: \_\_\_\_\_ Date \_\_\_\_\_

Please complete, scan and email this form, including all requirements, to [MLKPNO@hotmail.com](mailto:MLKPNO@hotmail.com)

OR

mail by USPS to: Mary Kading, 8921 Ridge Place, Bethesda, MD 20817.