

APPLICATION FORM

Manhattan Orchestral Institute

To be completed by the applicant; please print legibly:

Full name _____

Instrument _____ Number of years studied _____

Street address _____

City, State and Zip _____

Home phone (_____) _____ - _____ Cell phone (_____) _____ - _____

Email _____

Date of birth (MM/DD/YY): ____/____/____ (must be 16-20 years old at May 30, 2010)

Grade in high school or year in college _____

Private teacher (if none, list ensemble conductor) _____

Teacher telephone and email _____

Placement in your ensemble (e.g. 1st clarinet, second violin) _____

List of recently performed ensemble works with director & ensemble: _____

List of recently performed/studied solo works/etudes, if applicable: _____

Do you wish to be considered for participation in a Masterclass with one of our distinguished faculty?
(Accepted masterclass students must bring a well-prepared solo work to New York). YES NO

Check if CD accompanies application form _____ Check if CD is sent under separate cover _____

- continued -



Briefly discuss why you want to participate in the Manhattan Orchestral Institute:
