



Area 12
Handbell Musicians
O F A M E R I C A

JIM SCOTT MEMORIAL SCHOLARSHIP APPLICATION

The Jim Scott Memorial Scholarship assists one ringer and one director in attending each Area 12 Ringers' Conference. Only the conference registration fee, room (double occupancy), and any meals provided as part of the registration fee are covered by this award. To be eligible, applicants must:

- Reside within Area 12 (California, Nevada, Hawaii or Guam)
- Be attending their first Area 12 Ringers' Conference
- Be a member or associated with an organizational membership of the Handbell Musicians of America (aka the Guild)
- Director applicants currently must be a handbell/handchime director or contracted to be a director within Area 12
- Ringer applicants must be currently ringing in a handbell/handchime program within Area 12

This application is for financial aid as a: Ringer Director

Date: _____

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ E-mail: _____

Guild Membership Number: _____ Expiration Date: _____

How long have you been working with handbells/handchimes? _____

In what capacity?: Ringer Director Both

Name and location of current handbell choir(s): _____

Including your current ringing situation, please list all organizations where you have worked with handbells/handchimes: _____

What other handbell/handchime activities/events have you attended?

none workshop(s) festival(s) convention(s) local massed ringing events

other (please list): _____

Please explain your financial need (*this statement will be considered confidential*):

Why do you believe that you should be awarded a Jim Scott Memorial Scholarship?

RECOMMENDATION

The signature of a supervising authority figure within the applicant's organization, such as the minister, principal or director of music (or – *for ringer applicants only* – their handbell director) must certify this application.

I recommend _____ for the Jim Scott Memorial Scholarship

Printed Name: _____ Date: _____

Signature: _____ Phone: (____) _____

Title: _____

Name and address of sponsoring organization/director: _____

Please email this application to: pastchair.area12@handbellmusicians.org
(If you wish to send by regular mail, send an email to request mailing address.)

To be considered, this application **must be received no later than February 15th of conference year**. Applicants will then be notified of the final decision by March 15th.

(Before mailing, make a copy for your own records.)