

**Keith Brabant Music Scholarship Application**  
**P O Box 296**  
**Clayton, NY 13624**  
**315-686-2920**

Keith Brabant, a musician/composer born in Clayton, NY, believed that introducing children to music early in life, during their school years, was important for the appreciation of music throughout a person's life. He also believed that financial constraints should not prevent interested young people from pursuing their musical goals.

This scholarship has been created in honor of Keith, who died at age 33, but left a wonderful legacy of music for all. During his life Keith worked constantly to develop his musical talent, here in the North Country as well as in Colorado and Washington State. He toured throughout the western states sharing his music; while always finding time to enjoy nature - hiking, biking, and skiing - and the people he met along the way. Keith taught many young people to appreciate the gift of music and with this scholarship we are helping to ensure Keith's legacy is not forgotten.

The Keith Brabant Music Scholarship committee is interested in finding and assisting young aspiring musicians who are willing to put in the hard work to pursue their talent, but are in need of financial help. This scholarship is to assist those with a documented financial need. Monies may be used for a broad range of music related activities (college, lessons, instruments, books, summer music camp, etc.). If the money is for lessons, instruments, or other specific items, please include information on the costs below; payment may be made directly to provider.

Academic scores are not something the scholarship committee is putting a large emphasis on, but you may elect to submit grades/transcripts/awards or other documentation or background information you would like to be considered.

The recipient should demonstrate how music is and will be a part of their life. If application is for a very young person, parent may address the reasons they believe their child has an interest in music, and how they as parents will encourage that interest.

**This scholarship is available to persons between the ages of 5 and 25.**

**This scholarship is open to people living in Jefferson County, NY.**

**The application deadline is April 30th, 2019.**

**\*\*This is a needs-based scholarship. For your application to be considered, please include parents (if a dependent) or applicants (if not a dependent) "Adjusted Gross Income" from 2018 TAX RETURN – see page 4 of this application.**

If in college, please send a transcript or other proof showing you are enrolled in a music program. Please answer the section labeled **"This Section for College Students Only."**

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**NOTE: This application contains four (4) pages; please be sure you have a complete application.**

**Please fill out the information below to apply for this scholarship.**

**This Section for All Applicants:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Age \_\_\_\_\_

Elementary School, High School or College Attending (if applicable)

If a minor - Parent name and address/phone number if different

Employer (if applicable, Name, Address, Phone Number, Supervisor's Name)

**This Section for College Students Only:**

College Attending \_\_\_\_\_

College Major/Minor \_\_\_\_\_

Expected Graduation Date \_\_\_\_\_

Degree \_\_\_\_\_

**Educational Costs and Your Means to Cover These Costs Need To Be Explained:**

*Expected* annual cost of attending college:

Tuition \$ \_\_\_\_\_

Room and Board \$ \_\_\_\_\_

Fees \$ \_\_\_\_\_

Miscellaneous (books, travel, etc.) \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Scholarships and Grants Awarded

Scholarships \_\_\_\_\_

Tuition Assistance Program \_\_\_\_\_

Pell Grant \_\_\_\_\_

Work Study Grant \_\_\_\_\_

TOTAL \_\_\_\_\_

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**This Section for All Applicants:**

The recipient must state their goals and show their intention and plans to have music in their lives. Please provide a thoughtful written response to the questions below, and be prepared to address these questions during an interview.

**Please use a separate sheet of paper to complete the below items.**

- 1) Describe your passion for music and any musical interests and activities you have explored to-date.
- 2) How do you plan to keep music in your life and stay dedicated to music in the future?
- 3) Why should the Keith Brabant Memorial Scholarship invest in your future?

**Letter of Recommendation**

Please include with your application a letter or letters of recommendation from someone (one of which is other than a relative), who is familiar with you and your ideals and your musical aspirations.

**The Keith Brabant Music Scholarship committee will select a panel to review applications and choose scholarship recipient(s). If selected as a recipient, you will be notified of your status by May 31st.**

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**Additional Information:** If applying for assistance with music lessons, instrument purchase, summer music camp, or other, please provide the following additional information:

Instrument Purchase: What instrument \_\_\_\_\_  
Cost \_\_\_\_\_

Purchase of Books: What is needed \_\_\_\_\_  
Cost \_\_\_\_\_

Summer Music Camp: Where \_\_\_\_\_  
When \_\_\_\_\_  
Cost \_\_\_\_\_

Other: Describe \_\_\_\_\_  
Cost \_\_\_\_\_

**APPLICATION MUST BE RECEIVED or Postmarked by:  
April 30<sup>th</sup>, 2019. Send Application to:**

**Keith Brabant Music Scholarship**  
**P O Box 296**  
**Clayton, NY 13624**

**\*\*Required information: Parents (if a dependent) or applicants (if not a dependent) "Adjusted Gross Income" from 2018 Tax Return**  
**\$ \_\_\_\_\_**

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_