

Application Form For
LE ROY GREENSPAN MEMORIAL - FSMTA COMMUNITY SERVICE AWARD

District: _____ County: _____
 Application Of: _____

RULES and INSTRUCTIONS

This award is given to a 12th grade student in recognition of his/her leadership, achievements, and service to the community in the field of music during the 10th, 11th, and 12th grades. Special emphasis is placed on service to the community which is the essence of the award.

RULES

- 1. Applicant must be finishing the 12th grade and must be a student of an FSMTA Member teacher for at least six months.*
- 2. Applicant must be recommended by his/her FSMTA Member teacher and a music teacher and/or Principal of the student's high school.*
- 3. All applications must be in the hands of the local MTA President or High School Liaison Chairman by March 1st. Send the original and three (3) copies of the application to the FSMTA Community Service Award Chairman.*
- 4. A winner is selected to represent the county by the District Community Service Committee. Districts comprised of more than one county may have a representative for each county. Applications of county winners must be in the hands of the FSMTA State Chairman by April 1st. The Local MTA sends a fee of \$25.00, payable to FSMTA, which must accompany the application.*
- 5. The selection of the state winner is made by the FSMTA Community Service Committee. The state winner is presented an appropriate plaque and a check for \$500.00 at the FSMTA State Conference in November.*

INSTRUCTIONS

- 1. Please list by music organization and function the community service activities in which you have participated during the 10th, 11th, and 12th grades with the year and date of each activity. (e.g., Community Orchestra, Violin, 1999-2000; Christmas Concert 1999, Community Shopping Mall, Religious Services, Etc.)*
- 2. Application must be signed by your principal, vice principal, music, band, or choral teacher/director.*
- 3. Type/print and attach to your application an evaluation of your community musical activities, indicating which have been most rewarding and why, and which have helped you develop special abilities and interests.*
- 4. Obtain an unsigned letter of recommendation from your FSMTA member teacher. This letter must not show the name of your teacher. The teacher signs as indicated on the last page of the application.*
- 5. Attach a small (2" X 2") photograph to the application. If you are the state winner, a black and white glossy photo will be required for publication in The Florida State Music Teacher.*
- 6. The application must be completely filled out with dates of activities. Include letters of recommendation, your evaluation, and photo. Use additional sheets to expand the information if needed.*

APPLICANT INFORMATION

Name of Applicant: _____ Home Phone: _____
 Address: _____ City: _____ Zip: _____
 County: _____ District MTA: _____ Local MTA: _____
 Name of School: _____

**APPLICATION FORM FOR
LE ROY GREENSPAN MEMORIAL FSMTA COMMUNITY SERVICE AWARD**

District: _____ *County:* _____

Application of: _____

MUSICAL SERVICE ACTIVITIES:

Name of School: _____

10th Grade:

11th Grade:

12th Grade:

**APPLICATION FORM FOR
LE ROY GREENSPAN MEMORIAL FSMTA COMMUNITY SERVICE AWARD**

District: _____

County: _____

Application of: _____

COMMUNITY SERVICE ACTIVITIES:

10th Grade:

11th Grade:

12th Grade:

**APPLICATION FORM FOR
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District: _____

County: _____

Application of: _____

Piano Teacher's Letter of Recommendation

(Please, do not sign this form.)

APPLICATION FORM FOR
LE ROY GREENSPAN MEMORIAL FSMTA COMMUNITY SERVICE AWARD

District: _____ County: _____

Application of: _____

Address: _____ Home Phone: _____

City: _____ Zip: _____ Local MTA: _____

Email address: _____

Name of School: _____ Grade Point Average: _____

Awards, Honors, Special Recognitions:

* * * * *

Applicant's Statement

I am at present a student of _____, a member in good standing of FSMTA, and have studied approximately _____ years with this teacher.

Applicant's Signature: _____

* * * * *

Teacher's Statement

_____ is currently studying with me and has been a student of mine for approximately _____ years. I am a member in good standing of FSMTA and recommend this student for the LeRoy Greenspan Memorial FSMTA Community Service Award.

Teacher's Signature: _____

Address: _____

City: _____ Zip: _____ Email: _____

Local MTA: _____ District: _____

(Please Note: The FSMTA Teacher signing this application is also, in effect, signing the letter of recommendation. The teacher's name must not be on the letter of recommendation and must not be known to the adjudicators.)

**APPLICATION FORM FOR
LE ROY GREENSPAN MEMORIAL FSMTA COMMUNITY SERVICE AWARD**

District: _____

County: _____

Application of: _____

TO: Music-Band-Orchestra-Choral Director and Principals or Vice Principals

The above named student is applying for the LeRoy Greenspan Memorial FSMTA Community Service Award. Any 12th grade student who is currently studying with a Florida State Music Teachers Association member teacher is eligible to apply for this award. The award is given in recognition of the student's leadership, achievements, and service to the community and his/her church or synagogue in the field of music. The award covers activities in the 10th, 11th, and 12th grade of High School. A winner is selected in each county, and from these, a state winner is selected. The state winner is presented a plaque and a check for \$500.00 at the FSMTA State Convention in November. The award is based on the student's participation in school musical activities, church or synagogue activities, community service activities, and his/her study with an FSMTA Member teacher. Your signature will serve as an endorsement and recommendation for the above named student. You may append your own evaluation or letter of recommendation. Thank you.

Signature: _____

Position: _____

Additional Comments