

Michael Mitchell Voice Scholarship

This scholarship is intended to provide SCC classical vocal music students with financial assistance in a time of need. Students who need emergency assistance of \$750 or less are invited to apply. Award can be applied toward private voice lessons, clothes or costumes for auditions, performances; music contest fees, transportation costs related to audition/contest/performance; or SCC tuition and/or fees. Students may receive only one scholarship award per academic year. Scholarship funds are not available during summer quarter.

This award has no cash exchange value and is non-transferable.

Eligibility criteria:

- Be a returning full or part-time student at Shoreline Community College
- Must be a U.S. citizen or legal U.S. resident or permanent U.S. resident with an I-551 Card or a student in F-1 nonimmigrant status.
- Be a classical vocal music major and currently involved in SCC music performances – Chorale, Shoreline Singers, Opera Workshops and/or musical.
- Be an ongoing SCC student with a minimum cumulative SCC GPA of 2.5, and minimum 3.0 average in music courses.
- Be in good standing with the college.

Determination of award and notification of applicant:

Once the application is received, the SCC Foundation office will contact the Music Faculty for their review of the request. If submitted during an academic session, every effort will be made to notify the applicant of the decision within two weeks of the application being submitted. Applications received during breaks between quarters may result in longer notification periods.

Submit application to:

SCC Foundation
16101 Greenwood Ave N
Room 1005
Shoreline, WA 98133-5696

For questions regarding the scholarship:

SCC Foundation contact:

Lynn Yaw
(206) 533-6783
lyaw@shoreline.edu

SCC Music Department:

Fred Lokken
(206) 546-5899
flokken@shoreline.edu

Shoreline Community College provides equal opportunity in education and employment and does not discriminate on the basis of race, color, religion, national origin, sexual orientation, age, marital status or disability.

Michael Mitchell Voice Scholarship Application

Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone Number (s): _____ Email Address: _____

Expected Degree _____ Expected Graduation from SCC: Month _____ Year _____

SCC Student Number: _____ Social Security # _____
(or copy of I-551 or F-1 documents, if applicable)

Briefly describe your educational and career goals: _____

Description of involvement in SCC music productions/groups: _____

Amount requested: \$ _____ For: _____

Brief Explanation of current emergency situation/why this award is necessary: _____

Other Financial Resources you have investigated and result: (list and describe result) _____

Attach additional pages if necessary to explain your story.

Student Signature: _____ Date: _____

I certify that the information provided in this application and all attachments are accurate and complete. Appropriate financial documentation may be required. By applying, I certify that I meet the qualifications and requirements. I authorize the SCC Foundation to verify any and all submitted information through appropriate means. I understand that submission of this application authorizes Shoreline Community College and SCC Foundation the right to use my name, application materials and images for publications, reports and press releases in any media.

Committee: Approval Rejection Amount \$ _____ Signature _____ Date _____

Received in Foundation Office : _____ Date _____

Action: _____ Date _____