

APPLICATION FOR A MUSIC AUDITION

(Please use BLOCK CAPITALS and tick the appropriate box to indicate whether you are applying for a **Scholarship Audition** or an **Entrance Audition**)



LEICESTER
GRAMMAR
SCHOOL

Entrance Audition

Scholarship Audition

Please circle as appropriate **11+** **12+** **13+** **14+** **6TH Form**

Name of Candidate:

Date of Birth:

Parents' Name:

Address:

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Telephone No:

Email:

Instrument(s):

Details of exams passed (*with marks*) or level attained:

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Details of relevant musical experience (*orchestras, groups, choirs, etc*)

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Present School:

Music Scholarship Candidates only:

Names and addresses of two referees:

(*one of whom should be your school music teacher; the other your instrumental teacher*)

1:

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2:

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