



MUSIC SCHOLARSHIP APPLICATION FORM

APPLICANT'S DETAILS

First and last name _____ Preferred Name _____

Gender _____ Date of Birth _____ Year group applied for _____

PARENT'S DETAILS


First and last name _____ Relationship with the child _____

Email address _____ Contact number _____

Instruments played (please continue on a separate sheet if necessary).

Instrument	Number of years played	Equivalent Grade/Level

Please give detail of any competitions, concerts, festivals or courses you have been involved in including dates/locations, prizes (if applicable). Please continue on a separate sheet if necessary.



Please return your completed application form to admissions@dbsbangkok.ac.th.
You will be notified within two weeks if your application has been successful and you have been invited to audition.