APPLICATION FOR THE FRIENDS OF EASTMAN OPERA

2024-25 SUMMER PROGRAM APPLICATION

Deadline: March 21, 2025

Name		Date	
Email		Phone	
Voice Type		Program of Study	
Primary Teacher		Year of Study	
		MMENDATION FROM YOUR PRIMARY TE.	
Program Title/Location		Dates	
Describe your participation	in the program		
What do you expect to gair	ı from this program	1?	
PROGRAM COSTS		FUNDING SOURCES	
Tuition		Personal/Famiily	
Lodging and Food		Program Scholarship	
Transportation		Other sources (specify)	
Other costs (specify)		Amount requested from FEO	
* TOTAL CO	OSTS	* TOTAL SOURCES	
	*Total Cos	ts must equal Total Funding	
PLEASE ATTACH T	O THIS APPLICATION	ON:	

- 1) up-to-date resume
- 2) a copy of your acceptance letter (*if not available, go ahead and submit your application without it*) 3) if available, a digital brochure of the program or a link to its website

SEND THIS APPLICATION AND REQUIRED DOCUMENTS TO feogrants@gmail.com.