



Application to MUSIC DEPARTMENT For Music Majors

Please attach
your photo here

PLEASE PRINT OR TYPE

Name _____ Today's Date _____

Birth Date ____/____/____ Gender: M F

Applying for which semester?

Fall__ Spring__ Year _____

E-mail Address _____

Are you interested in a

Music Scholarship? _____

Home Phone _____ - _____ - _____ Cell Phone _____ - _____ - _____

Mailing Address _____

City _____ State _____ Zip _____

Father's Name _____ Mother's Name _____

Have you applied to Corban College? _____ Has your application been accepted by Corban College? _____

College major or interest(s) _____

High School _____ Enrollment / Size of High School: _____

H.S. Music Teacher(s) and phone number(s) _____

H.S. Graduation Date _____ Cumulative GPA _____ ACT score _____ SAT score _____

Home Church - Name/City/State _____ Music Leader _____

Years of music participation _____ Voice part _____

Musical instruments that you play and years for each instrument _____

Musical ensembles and activities that you have participated in _____

Music leadership positions you have held _____

Individual Music Honors that you have received _____

Other awards and honors (academic, community, church, etc) _____

Have you taken private lessons? _____ What instrument(s) and how long? _____

Teacher(s) Name/Phone Number/City/State

If you are a pianist, have you accompanied other musicians? _____
Please describe your experience _____

Please describe your relationship with Jesus Christ. _____

How did you hear about Corban College? _____

Top three colleges you're interested in attending:
1) _____ 2) _____ 3) _____

Transfer Students - Please fill out the following:

Previous college(s) and years attended _____

College GPA _____ Entering grade level at Corban College (circle one) Fr So Jr Sr Grad

Previous college Music Director(s) and phone number(s) _____

Return to: Music Department
Corban College
5000 Deer Park Dr. SE
Salem, OR 97317-9392