



2026 Vocal Scholarship Application

Please Print or Type

Full Name	Age
Street Address	City, State, Zip
Cell Phone	Email
Current High School or College/University	High School or College/University City
Current Grade (HS)/Class Standing (College)/Degree Program (Graduate School)	College Plans (for HS students)
Current Voice Teacher	Voice Teacher's Contact Information Email: Phone:
Please acknowledge the following: I authorize Tampa Oratorio Singers to verify the information I have provided in this application, including by contacting the high school or college/university and the voice teacher I have listed above to confirm that I am a current student. ____ If selected, I commit to performing live with the Tampa Oratorio Singers during the upcoming season. ____ If selected, I give permission to Tampa Oratorio Singers to use my image/voice for promotion. ____	
Applicant Signature	Date
Parental Consent (required for applicants under 18 years old)	Date
Parent Name:	Parent Signature:

Please submit the following to scholarship@tostampa.org by **May 30, 2026**:

1. Your completed application form;
2. A signed letter of recommendation from your current voice teacher; and
3. A recent video recording of you singing an aria or art song, either a cappella or with accompaniment, and identifying the title and its composer.