

LUCILE PARRISH WARD VETERANS APPLICATION  
Annual Award of \$2,250

CA 3-1

Date of application \_\_\_\_\_

Entrant's Name (Please Print): \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Present Address: (Street/City/State/Zip Code) \_\_\_\_\_

Home State Address: \_\_\_\_\_

Home phone(\_\_\_\_\_) \_\_\_\_\_

On my honor I swear that I am an American citizen born on \_\_\_\_\_ in \_\_\_\_\_  
Date of birth Place of birth

Or naturalized on \_\_\_\_\_ in \_\_\_\_\_  
Date of naturalization Place of naturalization

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Veteran Awards do not require membership in NF MC)

Schools attended and degrees or diplomas granted: \_\_\_\_\_

Special music activities \_\_\_\_\_

Honors, Awards, Scholarships received: \_\_\_\_\_

Military Service: \_\_\_\_\_

Rank, Branch of Service, Organization and Address: \_\_\_\_\_

Reason for wanting this award and your future plans: \_\_\_\_\_

Please upload all items listed below to [www.nfmc-music.org/applicant-file-upload](http://www.nfmc-music.org/applicant-file-upload) by May 1<sup>st</sup>.

1. Completed typed application form.
2. Copy of discharge from service in the Armed Forces of the United States and proof of overseas service, if applicable.
3. Current photo in uniform if possible.
4. Six letters of recommendation showing your worthiness, need, character, background, musical talent, and potential ability. These must be original actual letters of recommendation, not copies of official evaluation forms.
5. One 30 minute performance/audition.
6. If possible, send three programs on which you or your compositions have appeared,
7. Entry fee of \$20.00 must be paid at [www.nfmc-music.org/payment](http://www.nfmc-music.org/payment).

Questions or concerns should be directed to the National Chair, Richard Dill – [dilltrp@gmail.com](mailto:dilltrp@gmail.com)

How did you hear about this award? \_\_\_\_\_

I hereby certify that I have read the Requirements and understand that my failure to abide by them will result is disqualification.

Signature: \_\_\_\_\_

Winners will be asked to submit their social security number and a completed W-9 to the NFMC treasurer (IRS requirement)

\*\*In the event of financial shortfalls, advertised award amounts may be adjusted. Applicants will be notified of the award change.