



# FISCHOFF

NATIONAL CHAMBER  
MUSIC ASSOCIATION

2022 – 2023

## FISCHOFF CHAMBER MUSIC ACADEMY INDIVIUDAL APPLICATION

Please fill out this form completely and mail to Geena Kam, 119 Haggar Hall,  
Notre Dame, IN 46556 or Email at [geena@fishhoff.org](mailto:geena@fishhoff.org)

Application Check List: 1) Non-refundable application fee of \$25. Fee will be accepted via website or send a check,  
payable to FISCHOFF, to Geena Kam, 119 Haggar Hall, Notre Dame, IN 46556 2) Completed application 3) Two video  
recordings 3) A repertoire list 5) Completed primary instructor recommendation form

Name of applicant: \_\_\_\_\_ Instrument: \_\_\_\_\_

Birthday: \_\_\_\_\_ Grade (2022-2023): \_\_\_\_\_ Started playing instrument: \_\_\_\_\_

School: \_\_\_\_\_ Years in chamber group: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian(s): \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary music instructor: \_\_\_\_\_ # years of taking private lesson \_\_\_\_\_

Instructor's phone number: \_\_\_\_\_ Email: \_\_\_\_\_

List performance experience (ensembles, etc.,):

List any musical honors/honors:

Tell what benefit you hope to gain from this program:

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

Date: \_\_\_\_\_



# FISCHHOFF

NATIONAL CHAMBER  
MUSIC ASSOCIATION

2022 – 2023

## FISCHHOFF CHAMBER MUSIC ACADEMY

### Primary Instructor Recommendation Form

#### INSTRUCTIONS

This form is to be completed by the applicant's teacher of private music lessons. If applicant is not studying music privately, the applicant's primary teacher of music, such as a school music teacher, should fill out this form. **This form must accompany the applicant's form and be filed at the same time.**

Name of Teacher: \_\_\_\_\_

Email: \_\_\_\_\_ Phone : \_\_\_\_\_

Name of Student: \_\_\_\_\_ Instrument taught: \_\_\_\_\_

How long has this student studied with you: \_\_\_\_\_

What evidence of the pursuit of excellence do you see in this student:

Do you recommend the Fischhoff Chamber Music Academy program for this student:    Yes    No

Give reasons:

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

Title: \_\_\_\_\_

Date: \_\_\_\_\_