



Southeastern Minnesota Suzuki Association

## Georgia Daniel Scholarship for Institute Application (\$100 per family for first time attendees only)

_____	_____	_____
Student First Name	Last Name	Parent Name
_____	_____	_____
Age	Years studied	Instrument
_____	_____	_____
Street Address	City, State, Zip	E-mail address
_____	_____	_____
Institute Location	Institute Dates	

Recipients of SEMSA Scholarships are responsible for a short article to be published in the fall SEMSA Newsletter. Photos are encouraged.

Deadline for application: June 1<sup>st</sup>

Please submit to: Barbara Bartleson  
2303 Crest Ln SW  
Rochester MN 55902

For questions, call 507-286-9230 or email: [bwbartleson@gmail.com](mailto:bwbartleson@gmail.com)

I affirm that this is the first Institute our family has attended.

\_\_\_\_\_  
Parent Signature