

Hello and thank you for your interest in the Arranger Certification Program Scholarship!

Please complete and return the Scholarship Application, List of References and Information Release form, plus three required arrangements (as outlined below) and the \$100 USD application fee by October **15** to:

Sweet Adelines International Education Department 9110 South Toledo Ave. Tulsa, OK 74137

Fax: 1-918-388-8035 Email: education@sweetadelines.com

Following are the guidelines for your required arrangements:

- 1. Please submit PDF files of three arrangements and indicate category on each:
 - a. Barbershop Ballad
 - b. Barbershop Uptune
 - c. Free choice

Note: Your two barbershop choices will be barbershop arrangements for female voices without extended solos and with the melody primarily in the lead part. Your free choice song should be an a cappella piece arranged in the barbershop style.

- 2. All three arrangements must be accompanied by original sheet music.
- 3. Your arrangement of any song that has been published by Sweet Adelines may be submitted, provided that you do not use the SA arrangement to help you during the arranging process.
- 4. Your own original composition will be accepted as your free choice submission only. A lead line with intended harmony should accompany any original submission.
- 5. Applicants are required to work from their own knowledge base to create the three arrangements needed for this application.

Best wishes for your success in this endeavor. If you have any questions, please email education@sweetadelines.com or call 1-918-622-1444 (Toll Free: 1-800-992-7464).



1.	Name		
2.	Member Number		
3.	Chapter		
4.	Region		
5.	Address		
	City, State, Zip, Country		
6.	Home phone		
7.	Mobile phone		
8.	Email		
9.	Year joined Sweet Adelines International		
10.	Has your affiliation been continuous since that time?		
11.	Former member of the following chapter(s)		
12.	What part(s) do you sing?		
13.	Please indicate the areas where you have experience as a member of Sweet Adelines International.	Chorus Director	
		Assistant Chorus Director	
		Chapter Administration	
		Regional Leader	
		Quartet Member	
		Quartet Coach	
		International Faculty Program	
		Director Certification Program	
		International Judging Program	
		Judge in	
		Other	



INTERNATIONAL

14.	Formal Musical Education (please list)	
15.	Other Musical Education (please list)	
16.	When (approximately) did you begin arranging?	
17.	What caused you to become interested in arranging?	
18.	What was the first song you arranged?	
19.	Who, if anyone, has assisted you with your arranging?	



INTERNATIONAL

20.	Name of any group(s) that have performed or are performing your arrangements?	
21.	Approximately how many arrangements have you done in the past year?	
22.	Please list the titles of some of the arrangements you have completed.	
23.	Why are you interested in entering the SA Arranger Certification Program?	
24.	List the three arrangements being submitted with this application and identify each as either a barbershop uptune, barbershop ballad, or free choice.	
25.	Describe your knowledge/ comfort level with technology, such as computer use (printing, scanning, using .pdf files, and email), music notation software, video conferencing such as Zoom or Skype, and whether you use a PC or a Mac computer.	



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26.	Should you be awarded the \$1500 USD scholarship, how do you envision using these funds in the first year?				
27.	Additional Comments:				
28.	Acknowledgement of Responsibility I hereby agree that if accepted into the scholarship program, I will do my utmost to progress toward certification in the Arranger Certification Program by dedicating the time and assets required to participate fully in the training and contribute arrangements to the organization's published music. In addition, I will support Sweet Adelines International's policy on copyright.				
29.	Applicant Signature:		Date		



Information Release Form

I hereby give you permission to complete a reference form furnished by Sweet Adelines International, and to release the form with recommendations to Sweet Adelines International. A photocopy of this form is as valid as the original.

Signature of Applicant	Date