

Gartow Stiftung

Freunde der Musik St. Petersburg

Application for a Grant

Personal information

Surname:

First name:

Date of birth:

Street/No.:

Postcode:

City/town:

E-mail:

Telephone:

Music experience

- Subject:
- Instrument:
- Institute:
- Class/Semester:
- Professor:
- Awards:

Previous grants from the Gartow-Stiftung:

Yes No

Desired Grant

Financial support to participate in a competition

Name of the competition:

Member of the World Federation of International Music Competitions (WFIMC)

Yes No

Member of the European Union of Music Competitions of Youth (EMCY)

Yes No

Date of the competition:

Location:

Internet address:

Financial support to participate in a Master course

Name of the Master course/summer course:

Date of the Master course:

Location:

Internet address:

Name of the professor:

Other (please explain)

Letter of artistic recommendation is included **Yes** **No**

Amount of the desired grant money

- Admission fee:
- Course fee:
- Travel expenses:
- Accommodation expenses:

Date: _____

Signature: _____