

2022 Vail Jazz Workshop Application Form

Thank you for applying for admission to the 2022 Vail Jazz Workshop. Before attempting to complete your Application, please review the Instructions, which can be found at <https://vailjazz.org/education/vj-workshop/>. Please ensure that you complete all of the Application requirements, by not only completing the Application form below, but also attaching and uploading with the Application all of the files that must be submitted. Thank you for your cooperation.

* Required



Contact Information

1. Full Name: *

2. Date of Birth: *

Example: January 7, 2019

3. I identify my gender as: *

Mark only one oval.

- Male
- Female
- Non-binary/Gender Nonconforming

4. US Citizen: *

Mark only one oval.

- Yes
- No

5. Email: *

6. Contact phone number: *

7. Is your contact phone number a mobile? *

Mark only one oval.

- Yes
- No

8. Home phone number if applicable:

9. Street Address: *

10. City, State Zip: *

11. Mailing Address if different:

12. Primary Instrument - Choose One: *

Mark only one oval.

- Piano
- Bass
- Drums
- Trumpet
- Alto Saxophone
- Tenor Saxophone
- Trombone

13. Secondary Instrument (if any): *

Mark only one oval.

- None
- Other: _____

Covid Vaccination Proof

To be eligible to attend the 2022 Vail Jazz Workshop, all selected Applicants must supply proof of receiving complete Covid vaccination shots and booster shots. Vaccination shots MUST occur at least two weeks before the start of the Workshop. Thank you for helping keep all of our students, instructors, and staff safe and healthy.

14. Type of Vaccination received: *

Mark only one oval.

- Johnson & Johnson *Skip to question 15*
- Pfizer *Skip to question 17*
- Moderna *Skip to question 17*
- Vaccination not received as of yet *Skip to question 20*

Skip to question 21

Johnson & Johnson

15. Date of Johnson & Johnson vaccination shot: *

Example: January 7, 2019

16. Date of Johnson & Johnson booster shot - If you have not received the booster shot yet, please note it will be required.

Example: January 7, 2019

Skip to question 21

Covid Vaccination Information

17. Date of first vaccination shot: *

Example: January 7, 2019

18. Date of second vaccination shot - If you have not received the second vaccination shot, please note it will be required.

Example: January 7, 2019

19. Date of booster shot - If you have not received the booster vaccination shot, please note it will be required.

Example: January 7, 2019

Skip to question 21

Please note: Proof of Covid vaccination will be required to attend the 2022 Vail Jazz Workshop

20. I verify that if selected to attend the Vail Jazz Workshop, I will be able to provide proof of Covid vaccination and booster shot completed two weeks before the start of the Workshop on August 27, 2022 *

Mark only one oval.

Yes

No

School Information

21. School Name: *

22. Grade Level Completing in 2022: *

Mark only one oval.

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23. Name of High School Music Director or Jazz Teacher: *

24. Email of Music Director or Jazz Teacher: *

25. Contact phone number of Music Director or Jazz Teacher: *

26. Is the contact phone number of the Music Director or Jazz Teacher a mobile? *

Mark only one oval.

Yes

No

27. Office phone number of Music Director or Jazz Teacher if applicable:

28. If you will graduate from high school this year are you planning on attending college in the fall? *

Mark only one oval.

Yes Skip to question 29

No Skip to question 31

N/A Skip to question 31

Attending College

29. Name of College, if known:

30. Date of first day of classes, if known:

Example: January 7, 2019

Personal Statement

Please answer each question below in a maximum of 200 words for each question. If you are selected to participate in the Workshop, the following information may be used in the Vail Jazz Festival program book, on the Vail Jazz website, and for other publicity purposes.

31. Supply short biography of yourself: *

32. Supply a history of your music studies: *

33. List bands/groups/orchestras you have played in: *

34. List music awards, citations, scholarship, etc. that you have received: *

35. Give a brief history of your jazz playing and listening experiences: *

36. Name your three favorite players on your primary instrument and why you like them: *

37. Describe your goals for the Vail Jazz Workshop: *

38. Describe your plans for community service: *

Musical Reference

Please supply the name, email, phone number and capacity of one musical reference:

39. Name of musical reference: *

40. Email of musical reference: *

41. Phone number of musical reference: *

42. Capacity of musical reference such as high school band director, teacher, other: *

Scholarship Information

Please indicate below if you would like to be considered for a full or partial scholarship from Vail Jazz to attend the Workshop. Note that financial information will be kept confidential and will only be used for determining eligibility for a scholarship. As set forth in the Instructions, if you are applying for a scholarship you must submit information set forth below, as well as a copy of page one of your family's most recent 1040 Federal Tax return. You may attached the form to the Application and upload it with the Application or you may separately submit the information via email at workshop@vailjazz.org.

43. I would like to apply for a scholarship: *

Mark only one oval.

Yes *Skip to question 44*

No *Skip to question 49*

Scholarship Financial Information

44. Total family Gross Income from all sources, from most recent tax return: *

45. Number of family members supported by the family income: *

46. Please upload page one of your families most recent 1040 Federal Tax return here, or submit it separately as a PDF via email at workshop@vailjazz.org

Files submitted:

47. Are there unusual circumstances that you feel may influence decisions regarding your eligibility for a scholarship? *

Mark only one oval.

Yes Skip to question 48

No Skip to question 49

Description of special circumstances

48. Please describe special circumstances: *

Upload Documentation Required

49. Please upload a current HIGH RESOLUTION photograph of you (head shot or playing your instrument) that will be used for publicity purposes. *

Files submitted:

50. If you have a link to your YouTube audition, you may copy and paste it here. If you do not have the audition recorded yet, you may send it to workshop@vailjazz.org when complete.

**Applicant's
Certification**

I have read the Instruction for completing my Application and I fully understand my obligations with respect to the Workshop. I hereby certify that the information contained in this Application is complete, accurate and honestly presented.

51. Type your full name below to serve as your electronic signature. *

52. Today's date *

Example: January 7, 2019

**Parent or
Guardian's
Certification**

This application must be acknowledged by your Parent or Guardian. They must certify that the information contained in this application is complete, accurate and honestly presented. Once you submit this form an automatically generated email will be sent to the parent or guardian's email address entered below. The parent/guardian must reply to the email for your application to be accepted.

53. Parent or Guardian's full name: *

54. Parent or Guardian's email: *

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