



**Orff Certification Levels
Scholarship Application
2019-2020**

Name: _____

Street Address: _____

Town: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

District you presently teach in: _____

Grades Levels Taught: Elementary Middle High

Levels Completed (**If applicable**): Level I Level II

If so, when and where? _____

Which Level will you be attending this summer? _____

Dates / Location / Sponsoring Educational Institution _____

Besides Levels, describe any other Orff Schulwerk Training that you have had. _____

Check this box to certify that you have paid your membership dues for the 2019-2020 Season. Keep in mind that your membership status will be verified.

On a separate piece of paper, please explain why you would like to attend a Levels course. If you wish, you may include any special circumstances that may have created a need for financial assistance. Please keep in mind that scholarship recipients will be asked to submit a short reflection article about their Levels experience and how it will impact their teaching.

Please email or mail this form and your explanation no later than March 28, 2020 to:

**Karin Puffer
2 Oak Street
Auburn, MA 01501
Pufferk@westboroughk12.org**