

UNIVERSITY OF KENTUCKY
School of Music

**FRIENDS OF MUSIC
REQUEST FOR FINANCIAL SUPPORT**

Name: _____

Address: _____ Phone: _____

_____ Email: _____

Check all the appropriate lines:

Ensemble Support

Student Support

Faculty Grant

Faculty Equipment

Full-time Faculty

Part-time Faculty

Full-time Student

Part-time Student

Undergraduate Student

Graduate Student

What is the total amount of the funds you are requesting? \$ _____

Will you receive funds from other sources? Yes No

Check Funding Period

(Requests should be submitted 30 days prior to beginning of funding period. See note below)

November 1- January 31 [application deadline – October 1]

February 1 – April 30 [application deadline – January 1]

May 1 – October 31 [application deadline – April 1]

These deadlines are important for proper consideration of your requests. In case of unforeseen needs which these deadlines will not accommodate, please see the President of FOM

Please return this form to **Ben Arnold, UK School of Music**
105-C Fine Arts Bldg.
Lexington, KY 40506-0022

School of Music Director: _____ Major Professor _____

(over)

