

**FLORIDA ATLANTIC UNIVERSITY, DEPARTMENT OF MUSIC  
CREMONA INTERNATIONAL MUSIC ACADEMY AND COMPETITION  
2017 Application Form**

Please contact Dr. Kofman at [ikofman@fau.edu](mailto:ikofman@fau.edu) with any questions regarding this application.

**Application Form:**

**Three-Week Program** from July 16<sup>th</sup> to August 6<sup>th</sup>

**Two-Week Program** from July 23<sup>rd</sup> to August 6<sup>th</sup>

**Student Information:**

Name: First \_\_\_\_\_ Last \_\_\_\_\_ Middle \_\_\_\_\_  
(as it appears in the Passport/Travel Document)

Date of Birth: \_\_\_\_\_ Gender: Male \_\_\_ Female \_\_\_

Citizenship: \_\_\_\_\_ Do you need a visa to travel to Italy: Yes \_\_\_ No \_\_\_

**Address:**

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile/Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Messenger: \_\_\_\_\_

Check one:  Piano  String instrument, specify: \_\_\_\_\_  Voice, specify: \_\_\_\_\_  
 Wind instrument, specify: \_\_\_\_\_  Composition: \_\_\_\_\_

Present teacher: 1 \_\_\_\_\_ 2 \_\_\_\_\_

How did you learn about the Academy?  
\_\_\_\_\_

Indicate one or more private teacher(s) you would like to study with during the Academy:

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

**Academic Information:**

I would like to register as a/an (select one):  Undergraduate  Graduate

University level attained: \_\_\_\_\_

School attended or attending: \_\_\_\_\_

I would like to receive 1 to 6 university credits: Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, specify how many \_\_\_\_\_

I would like to be considered for a limited scholarship: Yes \_\_\_\_\_ No \_\_\_\_\_

I would like to participate in Cremona International Competition for Strings and Piano:

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, please fill out the Competition Form:

<http://www.internationalmusicacademies.com/cremonaacademy/register/forms.htm>

Are you interested in taking Optional Course/s (places are limited; early registration is recommended)? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, list courses you are interested in taking:

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### Repertoire Information

List compositions you plan to study at the Academy *(use separate sheet if necessary)*

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List works you studied and performed in the last two years *(use separate sheet if needed)*:

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Have you played chamber music before? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, list works you have studied and performed in the last two years *(use separate sheet if necessary)*:

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Violinists: Would you be interested and willing to play viola in chamber music/orchestra?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, would you be able to bring your viola to the Academy? Yes \_\_\_\_\_ No \_\_\_\_\_



Email complete application package to:  
Dr. Kofman [ikofman@fau.edu](mailto:ikofman@fau.edu) and  
Cremona International Music Academy [info@internationalmusicacademies.com](mailto:info@internationalmusicacademies.com)

OR

Mail complete application package to:  
**International Music Academies/FAU**  
**PO Box 67462**  
**Chestnut Hill, MA**  
**02467 USA**