

**Frederick Community College  
Music Program**

**Shields Second-Year Music Grant  
Renewal Request**

**Spring Term 2015**

I wish to renew my Shields Music Grant for the spring semester 2015. I understand that this renewal is contingent upon my music instructor's recommendation.

\_\_\_\_\_  
[NAME]

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Date

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**To be completed by participating FCC applied music instructor:**

I give permission for \_\_\_\_\_ to renew his/her Shields Music Grant for the spring semester 2015.

\_\_\_\_\_  
Teacher Signature

\_\_\_\_\_  
Date

**Student or teacher should return this completed form to:**

**Dr. Paula Chipman  
Department Chair, Communications, Humanities and Arts**