



The Music Foundation
of Southwest Florida

INSTRUMENT REQUEST

Name of person (adult) or organization requesting instrument _____

Mailing address _____ City, State Zip _____

Daytime phone _____ Evening phone _____

• Student's name _____ Age _____

• School attending _____ Grade _____

• What instrument does the student play? _____ For how long? _____

• Is the student involved in a school music program? yes no ~ If yes, what? _____

• In any other music program? yes no ~ If yes, what? _____

• Has the student ever taken private lessons? yes no ~ If yes, with whom? _____

Instrument that you are requesting: _____

Why does the student need an instrument now? _____

Why is assistance with an instrument needed now? _____

Personal information:

Number of people in household _____ Number of wage earners in the family _____

Total annual family income _____ Annual rent/mortgage payment _____

Places of employment (1) _____ How long? _____ Phone _____

Places of employment (2) _____ How long? _____ Phone _____

Is the student in the school system's free/reduced lunch program? yes no

Other information you feel would help us to decide on your request _____

Name of individual completing this form _____

I certify that all information supplied is accurate.

Signature _____

FL driver license number _____ Date _____

Please submit a letter of recommendation from you school instrumental music teacher. Mail this form and the letter of recommendation to:

The Music Foundation of Southwest Florida
13300-56 S. Cleveland Ave. PMB 214
Fort Myers, FL 33907

Call 275-0057 if you have any questions. If additional space is needed, feel free to use the back side of this form or to attach an additional sheet of paper.