

# BCRMTA MUSICAL COMMUNITY SERVICE AWARD

## APPLICATION

Name of Student \_\_\_\_\_

The student named above wishes to apply for a \_\_\_\_\_ Certificate.

Teacher's Signature \_\_\_\_\_

Teacher's Name \_\_\_\_\_ BCRMTA Branch Name \_\_\_\_\_

Hours required: **Bronze** 10      **Silver** 35 (*10 from Bronze + 25*)      **Gold** 60 (*35 from Silver + 25*)

## RECORD SHEET

| <u>Date</u> | <u>Recipient of Service</u> | <u>Description of Service</u> | <u>Hrs</u> | <u>Verification</u> |
|-------------|-----------------------------|-------------------------------|------------|---------------------|
| _____       | _____                       | _____                         | _____      | _____               |
| _____       | _____                       | _____                         | _____      | _____               |
| _____       | _____                       | _____                         | _____      | _____               |
| _____       | _____                       | _____                         | _____      | _____               |
| _____       | _____                       | _____                         | _____      | _____               |
| _____       | _____                       | _____                         | _____      | _____               |
| _____       | _____                       | _____                         | _____      | _____               |

If more space is required, please attach another sheet

**TOTAL HOURS** \_\_\_\_\_

Recipient can be an individual, institution or organization . Hrs should be shown to the nearest .25 Verification is to be a signature by someone representing the recipient.

Certificates are issued twice per year. Deadlines: **Oct 1** for Fall mailout **May 1** for Spring mailout

*Unless otherwise arranged by the Branch Executive, all Certificates are mailed to the BCRMTA Member for distribution to the student.*

Send completed form to

BC Registrar, P.O. Box 45537 Sunnyside RPO , Surrey BC V4A 9N3