

CalCap Application

Please mail to:

CalCap Chamber Music Workshop/VITA Academy

200 P Street, B 31

Sacramento, CA 95814

1. **Name**

2. **Email**

3. **Phone**

4. **Instrument(s)**

Check all that apply.

- Violin
- Viola
- Cello
- String Bass
- Piano
- Flute
- Oboe
- Clarinet
- Bassoon
- Horn

5. **Session Option**

Mark only one oval.

- Week 1; July 22-27
- Week 2; July 29-August 3
- Either Week (best possibility of acceptance)
- Both Weeks

6. **I am (please check all that apply):**

Check all that apply.

- A college student wishing to apply for a scholarship
- A non-student wishing to be considered for a scholarship
- A returning CalCap participant (please indicate most recent year attended)
- A first time participant (please complete the brief musical resume below)
- Planning to stay in university housing if accepted

7. **Estimated Ability/Experience Level**

Mark only one oval.

- Intermediate - can play intermediate level music with reasonable solidity; minimal chamber experience.
- Intermediate but experienced - intermediate level training and skills; substantial chamber experience.
- Advanced but not experienced - substantial training and near-pro skills; little chamber music experience or a broad knowledge of repertoire.
- Advanced and experienced - near pro training and skill; substantial chamber experience.
- Professional -- a current or former professional musician.

8. **Please tell us about your current playing. Include the following information: How frequently do you practice? Do you take lessons? How frequently? Do you play with chamber ensembles, bands or orchestra? How frequently? Have you attended other chamber music workshops? Which and how often? If you are a new participant, please be particularly thorough.**

9. **If available, new applicants may insert a brief resume of your training and experience here.**

10. **If you are a new applicant, please include names and contact info of your teachers, coaches, and CalCap participants you know.**

11. **Please provide an Emergency Contact with phone number. Also please include any additional information you think would be helpful to the staff.**

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