



*Preliminary submissions must accompany one completed Rice application (including the Shepherd School String Quartet Supplement) and one application fee to receive admission consideration. If your submission is approved and your quartet is invited for a live audition, all quartet members must complete individual applications and submit individual application fees.*

**NAME OF QUARTET** \_\_\_\_\_

**NAME OF QUARTET MEMBERS** *(please list appropriate contact member first)*

\_\_\_\_\_  
Name Instrument

\_\_\_\_\_  
Address Phone

\_\_\_\_\_  
City State Zip Country

\_\_\_\_\_  
Date of Birth Age Citizenship

\_\_\_\_\_  
Name Instrument

\_\_\_\_\_  
Address Phone

\_\_\_\_\_  
City State Zip Country

\_\_\_\_\_  
Date of Birth Age Citizenship

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Name Instrument

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City State Zip Country

\_\_\_\_\_  
Date of Birth Age Citizenship

\_\_\_\_\_  
Name Instrument

\_\_\_\_\_  
Address Phone

\_\_\_\_\_  
City State Zip Country

\_\_\_\_\_  
Date of Birth Age Citizenship

**EDUCATION:** *(For each quartet member, list name and location of university/professional music school, year(s) of attendance, and degree(s) received.)*

Name	School	Dates	Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PRINCIPAL TEACHERS:**

Name	Address	City, State, Country	Date(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SCHOLARSHIPS, AWARDS, PRIZES OR FOUNDATION GRANTS RECEIVED BY THE QUARTET:**

Awarded by	Purpose	Amount	Date(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PERFORMING EXPERIENCE:** *(Please summarize your quartet's most recent and upcoming engagements. Attach additional sheets if necessary.)*

Name of Work	Name of Composer	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

**REPERTOIRE:** *(Please summarize your quartet's principal repertoire. Attach additional sheets if necessary.)*

Name of Work/Composer	Name of Work/Composer
_____	_____
_____	_____
_____	_____
_____	_____

Are you currently under commercial management? If yes, please list the management.

Name	Address	Date(s)
_____	_____	_____

Please use the space below if there is any additional information or material you think might be helpful in evaluating your application.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you learn about the Shepherd School String Quartet Residence program?

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

For the \_\_\_\_\_ Quartet