

**ROBERT MANN**  
STRING QUARTET  
INSTITUTE

**JAN 8–12, 2020**

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APPLICATION DEADLINE:

**NOV 15, 2019**

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**Chamber Music Department**

Manhattan School of Music  
130 Claremont Avenue  
New York, NY 10027

Katharine Dryden  
kdryden@msmny.edu

**APPLICATION FORM**

**NOTE:** Links demonstrating two or three repertoire pieces of different periods must be sent to kdryden@msmny.edu .

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Name of Quartet

Years as a Quartet

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Contact Member Name

Email Address

Phone

**First Violin**

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Name

Email Address

Phone

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Street Address

Apartment Number

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City

State

Zip Code

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Date of Birth

Age

Gender

Citizenship

**Second Violin**

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Name

Email Address

Phone

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Street Address

Apartment Number

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City

State

Zip Code

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Date of Birth

Age

Gender

Citizenship

## Viola

Name	Email Address	Phone	
Street Address	Apartment Number		
City	State	Zip Code	
Date of Birth	Age	Gender	Citizenship

## Cello

Name	Email Address	Phone	
Street Address	Apartment Number		
City	State	Zip Code	
Date of Birth	Age	Gender	Citizenship

## EDUCATION

School Currently Attending	State	Zip Code
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Principal Coaches/Teachers

For each Quartet member, please provide the name and location of school(s) studied at, principal teacher, years of attendance, and degree/diploma received (please attach additional pages if necessary):

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## PERFORMING EXPERIENCE

- You must show proof that your Quartet has performed together for at least one year.

Please list your Quartet's upcoming and most recent engagements (please attach additional pages if necessary):

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Please include your Quartet's repertoire list (please attach additional pages):

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Do you have commercial management?  Yes  No If yes, please provide management information:

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How did you learn about the Robert Mann String Quartet Institute at Manhattan School of Music?

Advertisement  Word of Mouth  Website \_\_\_\_\_  Other \_\_\_\_\_

Please list the names of two quartet repertoire pieces, ready to play, from distinctly different periods that you desire to work on at the Institute:

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## COSTS

A \$100 application fee is to be submitted with the application by **November 15, 2019**.

A \$500 Quartet tuition fee will be required from each accepted Quartet by **January 2, 2020**.

*The application fee and tuition are payable by check or money order, made payable to Manhattan School of Music.*

_____ Signature	_____ Date	_____ Name of Quartet
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## SUBMITTING THE APPLICATION

### APPLICATION DEADLINE: NOVEMBER 15, 2019

*Please note that Quartets must not have other obligations during this period unless their absence is approved by the Institute in advance.*

Please submit your application to:

#### Chamber Music Department

Manhattan School of Music  
130 Claremont Avenue  
New York, NY 10027  
Katharine Dryden  
kdryden@msmny.edu

#### APPLICATION CHECKLIST

- Completed and signed application sent as a PDF to kdryden@msmny.edu
- Link(s) to performances demonstrating two or three repertoire pieces of different periods sent to kdryden@msmny.edu
- \$100 application fee (check or money order payable and mailed to Manhattan School of Music, 130 Claremont Avenue, New York, NY 10027)