

2024 KLEIN COMPETITION APPLICATION PREVIEW

Are you under professional management (US or internationally-based)?*

Yes

No

We regret that if you answered yes, you are not eligible to apply. Please do not continue.

Were you born on or after June 3, 2000 (no more than 23 years of age) AND on or before June 1, 2009 (no less than 15 years of age)?*

Yes

No

We regret that if you answered no, you are not eligible to apply. You must be between these ages at the time of the competition. Please do not continue.

First Name*

First name of the APPLICANT, not the person submitting for them.

Last Name*

Last name of the APPLICANT, not the person submitting for them.

Primary Email*

Email is our primary form of contact. Please provide an accurate email address that you will check frequently.

Primary Phone*

This will be the phone number we can reliably reach you at. It's generally best to give us your cell number. Please include any international dialing prefixes.

Birth Month*

Select..

You must have been born on or after June 3, 2000 (no more than 23 years of age) and on or before June 1, 2009 (no less than 15 years of age) to be eligible to apply. If not, please do not continue with this application.

Birth Day*

Select..

Birth Year*

Select..

Proof of Age*

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf, .doc, .docx, .txt, .rtf, .wpf, .odt, .wpd, .jpg, .jpeg, .gif, .tif, .tiff, .png, .svg

Please upload a passport, drivers license or ID with birthdate. This is to ensure that you meet the age qualifications.

Country of Birth*

Select...

Proof of Need for Fee Waiver Documentation

Choose File

Select up to 2 files to attach. No files have been attached yet. You may add 2 more files.

Acceptable file types: .csv, .doc, .docx, .pdf, .jpg, .jpeg, .png, .svg, .tif, .tiff

If you wish to apply for a fee scholarship (waiver of the \$125 application fee) please submit the following:

- Pre-College - either:
 1. Copy of parents' most recent tax filing if privately schooled.
 2. *AND* copy of needs-based award letter, if enrolled in a pre-college conservatory program, *except for Curtis and Colburn*.
- College:
 1. Copy of needs-based award letter.
 2. *Curtis and Colburn* students will need to submit a copy of parents' most recent tax filing.

I identify as

- African American or Black
- American Indian or Alaska Native
- Asian or Southeast Asian
- Hispanic or Latinx
- Middle Eastern or North African
- Native Hawaiian or Pacific Islander
- White or Caucasian
- Prefer to self-identify as below
- Prefer not to say

Select all that apply. Responses to this demographic question are optional, and will be kept anonymous, private and secure. Survey data will not be identified with an individual, and will be used for statistical reporting only. The information will not be used for a discriminatory purpose.

I identify as _____

I identify my gender as

- Female
- Male
- Non-binary / non-conforming
- Transgender

Prefer to self-describe as below

Prefer not to say

Select all that apply. Responses to this demographic question are optional, and will be kept anonymous, private and secure. Survey data will not be identified with an individual, and will be used for statistical reporting only. The information will not be used for a discriminatory purpose.

I identify myself as_____

Instrument*

VIOLIN

VIOLA

CELLO

BASS

Repertoire and Track Information*

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .mp3, .m4a, .wav, .ogg, .aac, .flac, .aiff, .wma

Upload ONE file with all tracks on it. Your application will not be considered complete unless all track description fields are filled out.

I currently live in:*

Tell us what CITY/STATE or PROVINCE and COUNTRY you currently live in and/or study in.

Current or Latest School Name, City and Country*

If you've recently graduated, please list your most recent school.

Current or Most Recent Teacher Name*

Teacher Affiliation/School and City*

Please indicate if your teacher is private (that is, not affiliated with a school).

Teacher Email*

I will pay the \$125 application fee by:*

Credit card

Check

Money order

I am applying for a needs-based fee-waiver

Please watch for a confirmation email, which includes important information required to complete your application fee payment. Application will not be considered complete until application fee is received. Contact us at info@californiamusiccenter.org if you have not received it. Thank you!

Save Draft

Submit Form