

Music Therapy Association of Georgia

Application Form 2026 MTAG SCHOLARSHIP - FOR MUSIC THERAPY INTERNS

Name: _____

Last

First

Middle

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____

University: _____

Projected Graduation Date: _____

Internship: _____ **City, State:** _____

Beginning Date: _____ **Completion Date:** _____

Please submit the following information:

1. Completed application form, including both information page and essay sections, signed and dated. (Must be emailed by March 1, 2026).
2. Download 2026 MTAG Intern Scholarship Reference Form and save it as a WORD file (not PDF). Email a copy of the Reference form to each of three (3) persons serving as references.
 - a. Persons providing references must include:
 - i. Music therapy professor,
 - ii. Professional familiar with the applicant's clinical skills, and
 - iii. Person of the applicant's choice.
 - b. Inform each reference that their document must be submitted as a WORD file.
 - c. Start early providing the current Reference Form and requests to your references as many have great demands on their time.
 - d. Direct references to complete the 2026 MTAG Intern Scholarship Reference Form and email it directly to MTAG at MusicTherapyAssoc.Georgia@gmail.com by March 1, 2026.
3. GPA report signed by student's primary music therapy professor (may be in the form of a transcript or typed account of GPA).

4. Please note on your application if there is any special consideration (for a disability) that should be made that could possibly hamper the application process.
5. In order to ensure impartiality, application essay responses and recommendation letters should not include any information that could reveal the applicant's name, university, or city. Rather, use phrases like "this student", "the university", "in their city", "geriatric facility" as a replacement.

Submit application form and all other documents as email attachments to this email address:

MusicTherapyAssoc.Georgia@gmail.com

(Email only one copy of each document.)

Short Essay: Please answer the following questions in the space provided or attach additional pages if necessary. Reminder, please do not include any information that could reveal your name, university, or city.

Describe your experiences/activities as a music therapy student, including practicum work and volunteer experience as well as other activities.

Briefly describe your need for seeking financial assistance.

Define your philosophy of music therapy and explain why you chose music therapy as a career.

Upon completion of internship, what is your career plan in music therapy?

I am a music therapy student attending Georgia College and State University or the University of Georgia and will be interning within the next year, April 2026 -April 2027. Please note, the recipient must also be a registered member of the Music Therapy Association of Georgia.

Date

Signature