



Scholarship Application

All Information is Confidential

- **Please complete all information requested.** Incomplete applications will not be considered.
- Full or partial scholarships are provided to students who can demonstrate financial need, and/or have displayed a potential for, and a dedication to, the theatre arts.
- You will be notified by mail upon receipt of scholarship.

REQUIRED DOCUMENTATION

- 1) If your child qualifies for free or reduced lunches, please attach eligibility letter Or**
- 2) Please attach a letter of recommendation from a school/church/organization official.**

Child's Name: _____ Birthday: _____

Address: _____ City & Zip: _____

Scholarship(s) requested: FALL SESSION SPRING SESSION BOTH

Parent 1: _____ Parent 2: _____

Referred by: _____ Number in Family: _____

Parent 1: Phone (H): _____ (W) _____ Parent 2: Phone: _____

Parents Occupations: _____

Employed By: _____ Annual Gross Income: _____

List some of your child's hobbies and interests. _____

Explain why you are applying for the scholarship. _____

Tell us what you hope your child will gain from this experience. _____

Parent/Guardian Signature

Date

Office Use Only: Date Received _____ Notes _____ Status _____