

SCHOLARSHIP APPLICATION

Eligibility for scholarships is determined based on need, motivation, school input, and commitment by both students and parents to attend all regular classes and complete the course.

Section 1: St	udent Information				
Name:					
	Last	First		Middle Initial	
Address:					
	Street	City	State	Zip Code	
Date of Birth	MM/DD/YYYY	Age			
Primary Pho	, ,	Email Address: _			
Section 2: Fa	mily Information				
	er/Guardian (circle one)	Mother/	Mother/Father/Guardian (circle one)		
Name:		Name:			
Address:		Address:	·		
Occupation:		Occupati	Occupation:		
Phone:		Phone:			
Email:		Email:	Email:		
Section 3: In	icome				
Please check one box. Income indicated is the total yearly income.					
\$0 - \$10,000 \$10,000 - \$30,000 \$30,000 - \$50,000 \$50,000 - \$70,000 \$70,000 +					

Section 4: School Information

 Name of School:

Address:

Grade Point Average:

Section 5: Extracurricular Activities/Interests/ Hobbies

Please list all extracurricular activities, interests, or hobbies (i.e. sports, band, art, dance, etc.)

Section 6: Statement of Intent

Please write a brief statement about what you hope to achieve through the Pensacola Little Theatre Education Program.

Class Desired: _____ Starting Date: _____

Section 7: Signature			
If selected for a PLT Education Scholarship, I will attend all classes for which I have registered, and commit to completing the program.			
Student Signature:	Date:		
If my child is selected, I will assume responsibility for transportation and attendance.			
Parent/Guardian Signature:	Date:		