

SCHOLARSHIP APPLICATION

Visit www.providenceplayers.org for scholarship information

Complete the application form by filling in the grey entry boxes. The boxes will expand to an appropriate length for each field. Some entry fields have specific character space limitations. Where that is the case, you will see the character limit at the bottom left of your screen or by pressing F1 for help.

After you have completed the application, save the document for your records and email the application document to <a href="mailed-ema

I. PERSONAL INFORMATION

NAME (Last)	(First)	(Middle)			
HOME ADDRESS Street					
City	State	Zip			
TELEPHONE EMAIL ADDRESS					
II. EDUCATIONAL INFORMATION					
HIGH SCHOOL	GRADUA	TION DATE	/	/	(MM/DD/YYYY)
LIST ANY SPECIAL HONORS OR AWARDS RECEIVED IN HIGH SCHOOL (Press F1 for Help)					
LIST SIGNIFICANT EXTRA-CURRICULAR SCHOOL ACTIVITIES, AS WELL AS NON-SCHOOL ACTIVITIES SUCH AS WORK, CHURCH, ETC. DURING YOUR HIGH SCHOOL YEARS. (Press F1 for Help)					
COLLEGE, UNIVERSITY OR CONSERVATORY PROGRAM YOU PLAN TO ATTEND IN FALL 2018:					

III. THEATER INVOLVEMENT

In the space provided below (expandable grey box), please describe -

- your past involvement in theater arts and the contribution you have made to theater arts;
- your past involvement with the Providence Players of Fairfax (if any); and
- your plans to further contribute to theater arts.

This description may be no more than 5000 characters in length which will allow you approximately 750 words. We encourage you to be succinct. Although you may format this section as you see fit, we would encourage you to simply write three or four paragraphs covering your theater involvement and theater goals for the future. The field below will expand to the maximum allowable size as you type. This field will accept a cut and paste from another document. If you choose to cut and paste, you must use 12 point Tahoma, Arial, or Verdana fonts. (Press F1 for Help)

IV. ADDITIONAL INFORMATION TO BE SUBMITTED

The information described below must be received by April 30, 2018 to support your application. The information should be mailed to:

Providence Players of Fairfax Attention: Scholarship Committee P.O. Box 2393 Fairfax, VA 22031

- A. An official copy of your High School Transcript. (If you were home schooled, please send a list of curriculum or courses completed.)
- B. A copy of the acceptance letter to the accredited college or university or conservatory program that you plan to intend in the fall of 2018.
- C. Letters of Recommendation. Please arrange to have at least two but not more than three letters of recommendation sent to support your application. At least one of these letters must be from someone involved in theater arts.

V. Attestation

By submitting this application, I attest that all of the information contained in the application is true and that, if information contained in the application changes before May 20, 2018, I will inform Providence Players of Fairfax of such change by email sent to providence player@cox.net