

**TIM REDOVIAN SUMMER SCHOLARSHIP
APPLICATION FORM 2012**

****Please make sure all information is current and legible. Auditions and scholarships may be forfeited if we cannot reach the applicant using the information provided. ****

STUDENT NAME: _____ SCHOOL: _____

ADDRESS: _____

CITY STATE ZIP

PHONE #: _____ EMAIL: _____

CURRENT CLASS (CIRCLE ONE): Freshman Sophomore Junior

NAME OF SUMMER PROGRAM: _____

LOCATION OF PROGRAM: _____

HAVE YOU APPLIED OR BEEN ACCEPTED TO THE PROGRAM? _____

DATES OF PROGRAM: _____

TOTAL COST OF PROGRAM (scholarship does not cover student out of pocket expenses or other costs above and beyond direct program fees): _____

AMOUNT OF SCHOLARSHIP REQUESTED: _____
(full or partial scholarship NOT to exceed \$2,000)

MANDATORY CHECKLIST:

____ \$20 NON-REFUNDABLE APPLICATION FEE - Please note website confirmation # here if applicable:

____ RESUME ATTACHED

____ COMPLETED APPLICATION FORM (**SIGNED** BY STUDENT
AND PARENT OR LEGAL GUARDIAN)

____ OFFICIAL COPY OF CURRENT TRANSCRIPT OF GRADES

____ LETTER OF RECOMMENDATION FROM A
PERFORMING ARTS TEACHER

____ ESSAY

____ WRITTEN INFORMATION/BROCHURE DESCRIBING
SUMMER PROGRAM

____ HEADSHOT OR PHOTOGRAPH

I certify all information in this application is correct to the best of my knowledge.

Signature of Applicant

Date

I support my child's application for a Tim Redovian Summer Scholarship.

Guardian

Date

Signature of Parent/Legal