



“General Form” for any All About Theatre production.

Scholarship Application Form

Student's Name (s): _____

Production/Program Applying For: _____

Scholarship Amount Requested (be specific): _____

Parent/Guardian Information:

Full Name: _____

Relationship to Student: _____

Home Phone #: _____ Work Phone #: _____

Home Address: _____

People in Household: _____

Employer Name: _____

Employer Address: _____

Employed Full Time/Part Time?: _____

Email Address: _____

Financial Information:

Gross Annual Income: _____

Monthly Rent/Mortgage: _____

School Lunch Program Participant?: _____

Any Other Financial Information: _____



Scholarship Application Form

Describe Your Financial Need for this Scholarship:

I the undersigned have read the Scholarship Policy provided. I swear that all the filled in information is complete and correct to the best of my knowledge.

I understand that if the terms of the scholarship are violated, this scholarship grant will be withdrawn.

Parent/Guardian Signature #1

Signature #2

Date

For AAT official use only: _____

Application Approved: Yes / No

Amount Granted: \$____.00

Authorized Signature: _____

Application is to be completed and returned to AAT by the second day of auditions.

You may either mail or hand-deliver to the address below.

Attention - AAT Scholarship Committee

(8 3 1) 3 4 5 - 6 3 4 0

All About Theatre * 200 W. Cliff Drive * Suite 14 * Santa Cruz, CA 95060

MORE INFORMATION AVAILABLE online at: <http://www.allabouttheatre.org>