

GIRLS NITE OUT PRODUCTIONS SCHOLARSHIP AWARD 2019

APPLICATION FORM

Name:		
Address:		
City/town:		
State:	Zip:	
Phone:		
Email:		
College or Program you	plan to attend in September, 2019:	
Intended major:		
	ation in theater activities, with the most recent first. Us ttach as a composite outline of your experience, or atta	
Name of Play/Event		
Date		
Performed by:		
Your function or role:		

PLEASE ANSWER THE FOLLOWING QUESTIONS ON A SEPARATE SHEET OF PAPER

- 1. What do you believe is the value of the performing arts?
- 2. Describe your vision of what your future will be like after you've succeeded in establishing yourself in the theater arts.



- 3. What aspect of theater do you see yourself pursuing, and why?
- 4. Please share one of the most meaningful experiences you have had in theatre (either technical or performance) and describe what you learned from it.

Letters of recommendation must be sent in a sealed envelope (Marked "Confidential") along with your application.

Applicant's Signature:

Date:

All materials including two Letters of Recommendation must be received no later than April 19st, 2019. The Scholarship recipient will be contacted by May 20th, 2109. The award will be announced in conjunction with Graduation events at the recipient's High School.

MAIL TO:

Girls Nite Out Productions, Inc. P.O. Box 4037
Burlington, Vermont 05406
MARKED: SCHOLARSHIP