

Harlequins

Sandusky Community Theatre

SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

Name:

Current address:

City:

State:

ZIP Code:

Email address:

Phone number:

COLLEGE INFORMATION

College attending:

Major field of study

Minor

Address:

Anticipated graduation year

City:

State:

ZIP Code:

HIGH SCHOOL INFORMATION

High School

Address:

Phone:

City:

State:

ZIP Code:

REFERENCES

Name

Address

Phone

SIGNATURES

I am applying for the Harlequins Community Theatre scholarship. I understand the scholarship, if awarded, will be paid directly to the college I am attending. I am verifying all information submitted is correct.

Signature of applicant:

Date:

Harlequins Community Theatre awards one \$500 scholarship to a local high school or college student who has demonstrated an interest in theater. Please return this **application**, your **resume** (include all relevant theater experience) and **one letter of reference** (NOT from a family member) to: PO Box 1582, Sandusky, OH 44870
Applications must be post marked by April 1, 2024