

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 15, 2018.