



GATEWAY ARTS FOUNDATION SCHOLARSHIP APPLICATION FORM
APPLICANT'S GENERAL INFORMATION (please print or type)

Name of Applicant: Last: _____ Middle: _____ First: _____

Date of Birth: _____

Applicants Address:

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone: _____ Cell Phone: _____

Email Address: _____

Are you currently in school? _____

If yes, where? _____

Are you currently employed? _____

If yes, where? _____

Length of employment: _____

Please attach documents with the following information:

- Current and past studies
- Previous theatrical, musical and/or dance experience
- Awards and competitions
- Other activities and career goals
- Letters of recommendation

Why do you believe you should be considered for a Gateway Arts Foundation scholarship?

Please attach separate document.

I certify that all of the information on these forms is true and complete to the best of my knowledge.

Signature/Date: _____

FOR ALL TEACHERS TO COMPLETE:

Please provide the following information:

Your professional hourly rate: _____

Current number of lessons per month your student is receiving: _____