



Lakewood Institute of Theater



Youth Scholarship Application

Actor's Name: _____ Age: _____ Grade: _____

Parent Name(s): _____

Home Phone Number: _____ Cell Phone Number: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

My child attends this school: _____ *(Write-in 'home-schooled' if applicable.)*

School lunches are available to my child at... (Circle one):

No discount

A reduced cost

No charge/free

I am applying for a scholarship for the production/workshop titled: _____

Term (Circle one):

Fall

Winter

Spring

Summer

Please briefly describe the reason for your scholarship request.

Scholarship request information:

- I am able to contribute the following amount \$_____.
- I am requesting aid in the amount of \$_____.
- Monthly total income \$_____.
- Estimated monthly bills including housing \$_____.
- Number of people supported by this income _____.
- Number of those people under 18 years of age_____.



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The Lakewood Playhouse Institute of Theatre Youth program strives to enroll students regardless of their ability to pay. Each year we have a small budget for scholarships, and receive contributions from private donors. The information collected on this form and the completion of letters of thanks will ensure that we continue to receive the funding that we have in-place, and allow us to pursue additional funding sources. Please note that parents of scholarship recipients are asked to volunteer with the production – inquire with the education director at your earliest convenience to confirm a time and responsibility. Scholarship recipients are also asked to complete two letters:

- A formal thank you letter from the parent(s,) written to either “The Lakewood Playhouse” or “Lakewood Playhouse Youth Theatre Scholarship Donors.”
- A personal letter from the young actor, written to the “Lakewood Playhouse Youth Theatre.” This letter does not need to thank the theatre for the scholarship, but should include information about what was gained from the experience, how it was a positive experience, etc. If the child is very young, drawing a picture would be lovely.

I agree to the above conditions. I acknowledge that the information I have given is accurate. I understand that all of the information collected, both on this form and from the subsequent letters, may be used in publicity and grant-writing efforts in any way that the Lakewood Playhouse deems appropriate.

Parent Signature: _____ Date: _____

----- For Office Use Only -----

Date received _____ Date Processed _____ Date notified _____

Approved Scholarship Amount: \$ _____ Applicant Owes: \$ _____

Applicant (circle one):

Accepts or Declines

Ed. Director Signature: _____ Date: _____