

AQUINAS COLLEGE THEATRE PROGRAM SCHOLARSHIP APPLICATION

Please print clearly and completely. Attach another sheet if desired.

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone :(____)_____ **Email:**_____

High School: _____

Primary Focus (Choose one):

- Performance**
- Technical Theatre**

1.) Please describe in detail your short and long term goals in the art of theatre:

2.) Please list all previous theatrical events you have been involved in:

3.) Please provide additional information you would like us to know about you.

Mail application to:

Theatre Scholarship Application
Aquinas College Admissions Office
1607 Robinson Road SE
Grand Rapids, MI 49506