

THEATER SCHOLARSHIP APPLICATION

Social Security Number or A Number		Date of Application	
Name: (Last)		(First)	
		(Middle)	
Present Address (Street, City, State, Zip Code)			
Permanent Address (If Different From Above)			
Area Code & Phone No. (Cell)		Area Code & Phone No. (Home)	
Email			
Name of High School		Date Graduated	
Father's Name		Occupation	
		Employer	
Mother's Name		Occupation	
		Employer	
If Married, Spouse's Name		Occupation	
		Employer	
Do you currently work?		Employer	
		Intended Major	
List an scholarship and or financial, veteran's benefits, social security you receive			
Will you have the Scholarship and or Financial Aid next year?			
Do you wish to apply for a specific scholarship		If so, which one?	
Do you plan to attend a senior college?		When?	
		College?	
In the space below, please give any further details you desire or which you feel would be essential in our selection process including theatre experience. (Use reverse side of form if extra space is needed). Attach a copy of all transcripts, a copy of your current semester schedule and three (3) recommendation forms (provided).			

My signature below gives my permission to the Financial Aid Office to show the information on this form to any person involved in the selection process.

Signature

Date



Return to:
 Tyler Junior College
 Theatre Dept.
 P.O. Box 9020, Tyler, TX 75711