

AACT Academy
Scholarship Application

AACT Academy aims to offer theater experiences to as many different actors as we can. We understand that the cost of classes might make it difficult for some to attend. In order to alleviate this, we are offering a limited number of financial scholarships for our sessions.

The questions in this form are designed to help us determine both financial need and desire to attend. All of the information that you provide will be kept strictly confidential. Decisions will be made by the AACT Education Committee. You must still register your child for the camp you want per City of Auburn Parks and Recreation guidelines.

The scholarship covers full tuition for the Fall, Winter and Spring Terms. In addition, it covers all but \$20 of tuition for one Summer Camp. Please mark if you would like to use the scholarship for the term classes and mark which Summer Camp your actor will be attending.

Student _____ Age _____ Date of Birth ___/___/___

Address _____

City/State/Zip _____ Phone _____

Students may register for only one scholarship per season. However, this application is valid for the Fall, Winter, Spring, and Summer Sessions if they want to participate in those. Please check which session you are registering for at this time:

Term Classes (Fall, Winter, and Spring)

Musical Theatre Camp

Summer Intensive Session I

"Play" in the Woods

Summer "Play"

Summer Intensive Session II

Please check all that apply:

Student lives with: Father Mother Stepparent Guardian

Parents: Live Together Separated Divorced

Working: Father Mother Stepparent Guardian

Deceased: Father Mother

Financially Responsible for Student: Father Mother Stepparent Guardian Other

If "Other" please explain _____

Father _____ Phone _____

Address (if different than Student) _____

Place of Employment _____ Phone _____

Email Address _____

Mother _____ Phone _____

Address (if different than Student) _____

Place of Employment _____ Phone _____

Email Address _____

Guardian _____ Phone _____

Address (if different than Student) _____

Place of Employment _____ Phone _____

Email Address _____

Please explain any special family circumstances: _____

Why is your child interested in Theater? (This portion can be filled out by the parent or the student)

Please submit your form as promptly as you can. We must receive the form no later than two weeks before the beginning of the session your actor wants to attend. All scholarship award announcements will be made at least one week prior to the beginning of the session for which you have applied. However, we try to respond within one week of the receipt of your application.

For questions and to submit your application, please contact Melanie Brown, AACT Children's Theater Education Director at mbrown@auburnact.org.