

2020-2021 Classes Scholarship Application

Student Information

Name _____

Address _____

Phone Number _____

E-mail Address _____

Employer _____

Course Title You Are Submitting Scholarship Application for: _____ **Start Date:** _____

Alternative Course(s) You Would Accept a Scholarship For: _____

Total Number of Dependents

Adjusted Gross Income

Adjusted Gross Income for Spouse (if married)

(Your adjusted gross income can be found on the following IRS forms: 1040 line 37, 1040 A line 47 & 52, 1040 EZ line 11, Telefile K (2))

I declare that the above information is true and correct to the best of my knowledge.

Signature

Date

Please attach a half- to one-page essay (12 point font, double spaced) explaining why you would like to train in one of our Classes. Return this form and all supporting materials to Classes@ShakespeareTheatre.org

Scholarships for Classes are made possible by the Lorraine S. Dreyfuss Theatre Education Fund.