SCHOLARSHIP APPLICATION

P.O. Box 1146
Mesa, Arizona 85211-1146

Please type or write clearly and return application by _____ to:

Mesa Encore Theatre
ATTN: SCHOLARSHIP
P.O. Box 1146
Mesa, Arizona 85211-1146

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ MALE _____ FEMALE_____

HIGH SCHOOL _____

DRAMA INSTRUCTOR_____

THEATRE ARTS INTEREST: _____ Acting _____ Technical _____ Teaching

_____ Other _____

EDUCATIONAL GOALS_____

_____

CAREER GOALS _____

_____

(You may use the back of this application)

Finalists will be contacted for an interview time by _____

Please attach two (2) letters of character reference and a resume

If you have any questions concerning this application, please call (480) 834-9500 and leave a message.