

Instructions for the WTG 2018 Scholarship Application:

1. Print the following page (application)
2. Complete all parts of the application
 - a. Do NOT forget:
 - i. 2 letters of recommendation
 - ii. A no more than 200 word personal essay.
 - iii. Headshot photo (will not be returned) and resume.
3. Mail your completed application to:

Webster Theatre Guild
PO Box 670
Webster, NY 14580
Attention: Joseph S. Obbie Memorial Scholarship Award.

Please make sure your application is complete and postmarked by *May 1st 2018*. Incomplete and late applications will NOT be accepted.

Webster Theatre Guild uses the following criteria to decide recipients of scholarships:

- **Webster Theatre Guild Participation**
- **Other Performing Arts Participation**
- **Community Involvement**
- **Written Essay**
- **Letters of Recommendation provided**



Scholarship Application Form 2018



Webster Theatre Guild, Inc.
Joseph S. Obbie Memorial Scholarship Award
P.O. Box 670
Webster, N.Y. 14580

APPLICATIONS MUST BE POSTMARKED BY May 1st, 2018

Name: _____ Date: _____

Address: _____

Phone: _____ E-Mail: _____

High School: _____ College: _____

GPA: _____ Major: _____

References:

Please attach two letters of recommendation.

Webster Theatre Guild Participation (if any):

<u>Show Title</u>	<u>Part*</u>	<u>Year</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Performing Arts Involvement:

<u>Name / Title</u>	<u>Part*</u>	<u>Year</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

(*Part- Actor, Dancer, Ensemble, Set Design and/or Construction, Costume Design and Sewing, Lighting Design and Placement, Stage Crew, Director, Instrumentals, Conductor, Choir Member, Rock Band, etc.)

Community Involvement/Activities:

Please attach a resume detailing your community involvement.

Please include a **200 word essay** on how the performing arts have enhanced your life, your involvement in the community, and how you plan to continue your involvement in the arts.

Please return all materials to the address above postmarked by **May 1st, 2018**.
Applications will not be considered if incomplete.

Music Teacher or Advisor: _____ Phone: _____

Signature of Applicant: _____ Date: _____