

BROADWAY ROSE THEATRE COMPANY

Triple Threat Workshop Scholarship Application

1. Scholarship Application Materials must be received by the deadline below.
2. You may apply for a scholarship for each class/workshop in our Education Programs.
3. Eligibility criteria: any student who is 18 years old or younger whose family presents a financial need may apply for the scholarship. You must certify that the cost of the program would otherwise prohibit student from enrolling in class.

Educational Program:

- Dance It! Application deadline: 5 p.m., Monday, March 23, 2015
- Act It! Application deadline: 5 p.m., Monday, September 7, 2015

NOTE: Please do not call the Broadway Rose Theatre to inquire about the results of scholarship selections.

Please type or print your answers.	
Student Name:	Parent/Guardian Name:
Mailing Address: _____	
Street: _____	
City: _____	State: ____ Zip: _____
Daytime Telephone Number: _____	
Age of Applicant _____	
Email address of parent/guardian: _____	
What school does the applicant attend? _____	
Where did you hear about the scholarship program? _____	

To be completed by the Student:

I.	Please tell us why you would like to participate in the Broadway Rose Theatre Company camp or workshop.
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To be completed by the Parent:

2.	Please tell us about any special circumstances affecting your ability to pay the full tuition for this program:
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STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote Broadway Rose Theatre's education program. I certify that the cost of the program would otherwise prohibit me from enrolling in the class.

I hereby understand that if chosen as a scholarship winner, according to Broadway Rose Theatre Company policy, I must be registered for the class by the registration deadline to receive my scholarship award.

Signature of scholarship applicant: _____

Parent/Guardian signature: _____

Date: _____

You will be informed of your application status about a week after the deadline.

**SUBMIT ALL COMPLETED APPLICATIONS TO:
Broadway Rose Theatre, PO Box 231004, Tigard, OR 97281**

For questions, please contact Jeff Duncan at 503.906.2383 or email to jeff@broadwayrose.org.