



Scholarship Application 2016-2017

Thank you for your interest in our education program. This application gives you the opportunity to be considered for a scholarship that will pay up to 50% of your child's tuition cost.

Please complete all information thoroughly. Applications that are not completed may not be considered.

All information will be held in strict confidence.

I. PERSONAL INFORMATION

Student _____
First Middle Last

DOB: _____

Name of School _____ Grade _____

Parent/Guardian _____

Name

Address _____
Street City Zip Code

Home Phone _____ Cell Phone _____

What school related or extra-curricular activities have you participated in recently?

Which one have you enjoyed the most and why?

V. REFERENCES

Please provide the names of two people who can recommend you to be a good candidate for this scholarship. It may be a teacher, coach, private instructor, church leader, etc.

Name _____ Daytime Phone _____

Name _____ Daytime Phone _____

We certify that all the information given in this application is true and correct, to the best of our knowledge.

Student Signature _____ Date _____

Parent/ Guardian Signature _____ Date _____

**Please mail completed application along with your registration form to:
Unity Theatre
300 Church Street
Brenham, TX 77833**