# Scholarship Application

Please complete and return this application before the submission deadline given on the EDMT website. You will receive a reply prior to show registration so you know if you have received a scholarship for the production.

Production for which you are requesting a scholarship: (answer)

Name: (answer)

Age: (answer)

Male or Female: (answer)

Parent’s Name (if you are a minor or are still living at home): (answer)

Contact Phone: (answer)

Contact Email: (answer)

Have you ever received a scholarship from EDMT before? (answer)

Why are you requesting a scholarship? (answer)

How will being in the cast benefit you? (answer)

How will you being in the cast benefit the show? (answer)

Are you or your family willing to volunteer additional work hours to help compensate for your scholarship? (answer)

Is there any additional information you would like to add? (answer)