

## **STRATFORD COMMUNITY THEATRE SCHOLARSHIP APPLICATION**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Parents or Guardian(s):** \_\_\_\_\_

**High School:** \_\_\_\_\_ **GPA:** \_\_\_\_\_

**1. State your reason for wanting to further your education:**

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**2. State your reason for applying for this scholarship:** \_\_\_\_\_

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**3. What type of post high school institution do you plan to attend?**

a. college/university      b. tech school      c. other \_\_\_\_\_

**4. How many years do you plan to attend post high school training?** \_\_\_\_\_

**5. What field of study do you plan to pursue?** \_\_\_\_\_

**6. Are you planning to work while furthering your education?**

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**7. Have you been awarded any other scholarships, loans, or grants? (please list)**

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**8. List school and community activities as well as offices held. (please attach separate sheet if needed)**

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**9. List honors and awards.** \_\_\_\_\_

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**10. Attach two (2) letters of recommendation; Letters should reflect: Your sense of responsibility and involvement in your family, school, church, or community. Include address and phone number for contact purposes.**

**11. Attach a brief essay: Include a concise description your professional goals. In addition, include your approach toward school and community involvement.**

**12. Would you be willing to help serve 1 night during the play performances?** \_\_\_\_\_

**RETURN TO: STRATFORD COMMUNITY THEATRE**

**293 East Rondell Ave. Suite 1    Stratford, SD 57474**

***Applications can be dropped off at Prorate Services, 370 N 3<sup>rd</sup> St, Stratford, SD***

***DEADLINE 5:00 PM FEBRUARY 13, 2026***