



## GNTC Scholarship Application

A. Please complete:

Name	School
Address	Phone
City, State, Zip	
College you will be attending fall?	Major?
Parents/Guardians Name:	

B. Please list your theatrical experiences and year with Great Northern Theater Company, the role or job you performed and the director. This scholarship is only available to students who have been a part of GNTC.

**Year & Production Name**

**Role/Job Held**

**Advisor/Director**

*(If you need additional space, please follow format on attached page and label section B.)*

C. Please list your theatrical experiences with your high school or other organizations.

**Year, Group, Production Name**

**Role/Job Held**

**Advisor/Director**

*(If you need additional space, please follow format on attached page and label section C.)*

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**D.** Please submit a 350-500 word essay entitled, “What Community Theater Means to Me.” with your package. This essay must be typed, double spaced and on a separate piece of paper with your name written on the back only.

**E.** Please enclose a letter of recommendation from a drama instructor or director who is familiar with your work and your character. Please have submitter enclose it in a sealed envelope marked: **GNTC Scholarship Letter for (Your Name)**. Please include this sealed envelope with your application package before sending it, but send all pieces together so there is no confusion. Letters that appear to be tampered with will disqualify the entire application package and that applicant will be taken out of the process.

Applicant’s Signature

Date:

**Please mail complete package to: GNTC Scholarships, P.O. Box 504, Cold Spring, MN 56320**  
*Questions or additional forms, e-mail [President@gntc1.com](mailto:President@gntc1.com)*

**Postmarked no later than April 1 for scholarships to be awarded in May for the fall.**

*Applications postmarked after this date will not be considered. The Scholarship Selection Committee will meet in late April and decision will be made in early May. We offer two \$250 scholarships and awards will be determined depending solely on the recommendation of the Scholarship Selection Committee with voting approval of the GNTC Board of Directors. You will be contacted by phone or mail and arrangements will be made to get the recipients their funds.*

(You may use this additional space below for additional information for sections B & C.)

B or C. (cont’d)

**Year, Group, Production Name**

**Role/Job Held**

**Advisor/Director**