

1985 Lincoln Way Ste 23 Box 203 White Oak, PA 15131-2415 info@artsoutloud.org

# Dream Out Loud Scholarship Application 2019-2020 Scholarship Program

Deadline: Postmarked by March 30, 2019

### **SCHOLARSHIP PROGRAM CRITERIA**

Arts Out Loud has established annual scholarships for students identifying as LGBTQ pursuing a postsecondary degree in all disciplines of film, theatre, dance, or music. An individual is eligible to apply for a oneyear scholarship for education-related expenses if they meet the established criteria.

### **Eligibility Requirements:**

- Must be at least 18 and 24 or under on the first day of the school year.
- Essay of at least 500 words.
- Two letters of recommendation.
- Cumulative high school or college GPA of 3.0 or better on a 4.0 scale (overall and in the chosen area of study).
- Currently enrolled in, or accepted into an accredited four-year college or university.
- Link to your portfolio of work.
- Identify as LGBTQ.
- Citizen of the United States.

#### INSTRUCTIONS FOR COMPLETING SCHOLARSHIP APPLICATION

Please complete the application by typing or printing legibly. Only completed and signed applications will be considered.

#### Please submit the following items with this completed application form.

- 1. Copy of your most recent transcript of grades from current or last school attended. An official transcript from the school is required by the March 30, 2019 application deadline.
- 2. Two original letters of recommendation from individuals who are not related to you, the applicant. One must be from a faculty advisor. At least one should reflect your interest in pursuing or continuing post-secondary education. All must be in original form, and must be signed and addressed to the Scholarship Committee at the address noted below.
- **3.** On a separate sheet of paper, please prepare an **essay**, of between 500 1500 words, indicating your most memorable performance or project, how it felt, and how it inspired you to keep moving forward.
- 4. Provide proof of citizenship (copies of birth certificate, U.S. passport, or certificate of citizenship).
- **5.** Provide copy of driver's license or other State-Issued ID (copies of both front and back).
- **6.** Provide a letter of acceptance into your chosen program.

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## **APPLICANT'S PERSONAL INFORMATION**

Last Name:	First Name:		Middle	
ender □ Female □ Male □ Other		Date of Birth		
Identity ☐ Lesbian ☐ Gay ☐	] Bisexual □ Transgender	□ Queer □ Other		
Classification for 2019-2020	☐ College Freshman☐ College Junior			
ACADEMIC INFORMATION Are you currently enrolled or a university in the upcoming aca	accepted into a film, theatr		m at an accredited college	or
Expected Graduation Date from	m Program/			
List all high schools, colleges a <b>Name of School</b>	and universities attended, <b>Location</b>	including current:  Dates Attended	Degree Received	
School to which you would ap Type of Academic Program &	•	·		
Downson out / Home And		Towns way / Sa		4)
Permanent/Home Address  Street			hool Address (if differen	-
		_		
City		City		
StateZ	p	State	Zip	
Email address		·		
Day Telephone ()		Evening Telephone (	)	
Have you applied for other Sci	nolarships? □ Yes □ N	lo Have you applie	d for Financial Aid? ☐ Yes [	⊐ No
If no, why not?				

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PROJECTED ANNUAL SCHOOL EXPENSES FOR 2019-20		PROJECTED SOURCES OF INCOME FOR 2019-20		
Tuition		Parents' Contribution		
	\$		\$	
Room/Board or Other Housing Expenses		Grants – specify:		
	\$		\$	
Other Educational Expenses-specify:		Scholarships – specify:		
Other Francisco and St.	\$	Charles Francis and Transport	<u> </u>	
Other Expenses-specify:	\$	Student Employment Income	\$	
Total Projected Expenses	\$	Total Projected Contribution	\$	
Total Frojected Expenses	Ψ	Total Frojected Contribution		
Are you currently employed? $\Box$ Yes $\Box$ I	No Full or Part ti	me?		
If Employed, where:				
How did you hear about the Dream Out Loud	Scholarship Progra	am?		
☐ Friend ☐ School Fair				
☐ Faculty ☐ Website				
☐ Parent ☐ Other: please sp	ecify			
AGREEMENT & TERMS OF DREAM OUT L	OUD SCHOLARS	HIP APPLICANTS		
I understand that the Arts Out Loud Scholarship Co			onal interview, to mak	
a decision on my application. I agree that if this ap				
and conditions of the award.		• •	•	
If I am selected for this scholarship, I agree to pro	vide a conv of my of	ficial transcript (grades) at the end of the	comector	
if I am selected for this scholarship, I agree to pro	vide a copy of fifty of	ricial transcript (grades) at the end of the	semester.	
I understand that scholarship funds may only be a				
incur for tuition, room and board, and other educa				
scholarship and accept the award, a check for the			. I further	
understand that I am responsible for any tax liabili	ty incurred because	of this award.		
I certify that the statements that I have provided o	n this application are	e true and correct and are given for obtai	ning a Dream Out	
Loud scholarship. I authorize Arts Out Loud to veri	fy the statements co	ntained herein and I understand that all p		
contained on this application will be held in confide	ence by the Scholarsi	nip Committee.		
Applicant's Signature		Date		
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For questions or additional information please contact us at scholarship@artsoutloud.org