## John Young Foundation SCHOLARSHIP APPLICATION

Please fill in all information (print clearly or type). Name \_\_\_\_\_\_Age\_\_\_\_ Address \_\_\_\_\_\_\_\_ City \_\_\_\_\_\_ Zip Code \_\_\_\_\_ Parent/Guardian Name(s) Phone Numbers (Day) \_\_\_\_\_Contact Name \_\_\_\_ (Evening) Email School Name \_\_\_\_\_ Grade \_\_\_\_\_ Teacher's Name School Phone Number \_\_\_\_\_ Please answer the questions below; attach an additional sheet if more space is needed: Please list any performing arts classes you have taken, location and names of the instructors. In 50 words or less, please tell us what you enjoy about live theatre? Why should you be considered for the John Young Foundation Scholarship? What do you think you will gain from the Musical Theatre Experience program?

Please email or mail completed application, photo of applicant, and letter of recommendations to:  $\mbox{mcalantoc}$  diamondheadtheatre.com  $\mbox{OR}$ 

Diamond Head Theatre, Attention: Education Department, 520 Makapuu Avenue, Honolulu, HI 96816.