

St. Clair Theatre Guild

John & Avis Cobb Memorial Fine Arts Scholarship

2010 Application

Date _____

Applicants Name _____

Address _____

Parent / Guardian or Nearest Relative

Intent for Scholarship Funds _____

Major of Study _____

Institution or Organization that you wish to attend _____

School presently attending

Grade Point Average

References:

Please list at least three (3) personal references, NOT currently living with you, and have each provide a Letter of Recommendation with application.

NAME	Address	Relationship
1.	_____	_____
2.	_____	_____
3.	_____	_____

Summarize your experience with the St. Clair Theatre Guild.

Please list any other qualities/traits/experience that you feel warrant consideration of the Committee. (Use additional paper if necessary)

Applicant Signature _____

Parent/Guardian Signature (if applicant is a minor)

All applications MUST be mailed to the address below to be considered.

**St. Clair Theatre Guild
c/o Kevin Bandlow
5698 Church Road
Casco, MI 48064**

If you have any questions regarding the application, please contact a member of the Scholarship Committee.

Tony Cavis	Kerry Cote	Kevin Bandlow
810-329-2630	810-650-1848	586-453-2473

Applications must be postmarked and received at the above address by: **May 10, 2010**