

St. Clair Theatre Guild
John & Avis Cobb Memorial Fine Arts Scholarship
2018 Application

(For scholarship criteria, please visit www.sctg.org/cobb-scholarships)

Application date _____
Applicant's name _____
Mailing address _____

Parent, guardian or nearest relative's name _____

How do you plan to use the scholarship funds?

Major area of study _____

School, college, or university you will attend _____

School you currently attend _____

Current grade point average _____

**Please list at least three personal references who are not currently living with you.
Each will need to provide a letter of recommendation to be included with this application.**

Reference's name	Address	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

Summarize your experiences with the St. Clair Theatre Guild *(use back of application if needed)*.

Please list any other qualities, traits, or experiences that you feel should be considered by the Scholarship Committee *(use additional paper if needed)*.

Applicant's signature _____

Parent or guardian's signature
(if Applicant is under age 18) _____

All applications MUST be mailed to the following address to be considered:

St. Clair Theatre Guild
Attn: Scholarship Committee
PO Box 136
Saint Clair MI 48079

If you have any questions, please contact the St. Clair Theatre Guild at www.sctg.org/contact-us.

Applications must be postmarked and received by April 15, 2018.