

**Application for Grandstreet Theatre Student
Scholarship**

Name _____

Mom's name _____

Dad's name _____

Primary email and phone contact _____

Address _____

School _____ Grade _____

Name of teacher writing recommendation _____

Contact information for teacher _____

1. Submit a short paragraph stating your financial need.
2. Submit a written recommendation from a teacher
3. Submit a short hand written paragraph from the student stating why they would like to attend Grandstreet Theatre School and what they expect from the program. For children under 8 please have them draw us a picture of themselves.

Submit all materials to:
Grandstreet Theatre School
Attn: Marianne Adams
P.O. Box 1258
Helena, MT 59624