



2022-2023 Classes Scholarship Application

Student Information

Name _____

Address _____

Phone Number _____

E-mail Address _____

Employer _____

| | |
|--|--------------------|
| Course Titles You Are Submitting Scholarship Application for: | Start Date: |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Alternative Course(s) You Would Accept a Scholarship For:

| | |
|---|----------------------|
| Total Number of Dependents | <input type="text"/> |
| Adjusted Gross Income | <input type="text"/> |
| Adjusted Gross Income for Spouse (if married) | <input type="text"/> |

(Your adjusted gross income can be found on the following IRS forms: 1040 line 37, 1040 A line 47 & 52, 1040 EZ line 11, Telefile K (2))

I declare that the above information is true and correct to the best of my knowledge.

| | |
|------------------|-------------|
| _____ | _____ |
| Signature | Date |

*Please attach a half- to one-page essay explaining why you would like to train in one of our Classes. Return this form and all supporting materials to **Classes@ShakespeareTheatre.org***

Scholarships for Classes are made possible by the Lorraine S. Dreyfuss Theatre Education Fund.