



Grand Intensive Scholarship Application

The Allen Fitch Fund

Thank you for your interest in our Education Programming. A limited number of partial scholarships are available through the Allen Fitch Fund. **A 50% deposit of the tuition is due at the time of registration regardless of a pending scholarship application.** Should your child be awarded a scholarship that exceeds the deposit, a refund will be issued. Please note that scholarships are highly competitive and an application does not necessarily guarantee an award.

The Allen Fitch Fund has been created in memory of Allen Fitch. Allen was a long-time supporter of The Grand as well as a veteran actor in multiple musical productions on The Grand stage. He also served on the Board of Directors of The Grand in the early 90's. Allen had a huge love for The Grand and the arts!

Please fill out completely and mail with registration form to:

**The Grand Theater
Attention: Scholarships
165 Main St.
Ellsworth, ME 04605**

Parent/Guardian Name: _____ Application Date: _____

Student's Name: _____

Age of Student: _____

Student's Birthday: _____

School your child attends: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Intensive Program you are applying for: (Circle One)

Disney's Winnie the Pooh Kids -K-5

The Phantom Tollbooth JR – 5-9

Peter & the Starcatcher 9-12

1. Why are you interested in your student attending the Summer Intensive program?

2. Has your student had any previous theatre training? Where?

3. Tell us a little bit about your student.

4. What qualities could your student bring to our program?

5. What experience does your student have in acting, singing or dance?

6. What other extracurricular programs has your student been involved with over the past year?

7. Please list any other scholarships your student has applied for/received to attend our program (including the amount of the scholarship if already awarded).

8. Please share with us any special circumstances or financial difficulties that might apply. All information will be kept strictly confidential.

Application Deadline: June 1, 2018

Signature: _____ Date: _____

Thank You for your application. All applications will be reviewed and you will be contacted if your student has been granted a scholarship.

FOR INTERNAL USE ONLY

Student Name:

Approved: Scholarship
 Work Exchange

Session: _____

Terms of Approval:

Not Approved: Scholarship
 Work Exchange

Reason:

Signature

Date