*The Heart of Hope*

Scholarship Application

Sponsored by Perrysburg Musical Theatre (PMT)

Applicant Name:

Current High School:

High School GPA (end 3rd Quarter):

(Submit a letter from the Principal’s office with your GPA at end of third quarter, signed and dated)

PMT shows that you have participated in (only one required to apply, but list all using a separate page if needed):

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| Name of Show | Participation Role (cast, crew, set, etc.) | Date |
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On a separate page, please write a 500 word or less essay on *one* of the following:

1.   Describe your experience with Perrysburg Musical Theatre and the impact that this experience has had on your life to date.

2.   Complete this thought “I am glad I am part of the Perrysburg Musical Theatre family because….”

3.   How has your past participation with Perrysburg Musical Theatre prepared you for life beyond high school?

4.   Describe your experience with Perrysburg Musical Theatre and how this helped form the person you are today.

Submit the following materials:

* Above application
* Letter from high school Principal’s office verifying end 3rd quarter GPA
* 500 word (or less) essay

Either by mail or email to:

Scholarship Application

Perrysburg Musical Theatre
PO Box 884
Perrysburg, OH 43551

perrysburgmusicaltheatre@gmail.com SUBJECT LINE: Scholarship Application Submission

**Applications must be postmarked or email dated no later than April 15 to be considered.**

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| https://lh4.googleusercontent.com/wN1Jh-9WzLZQhoM5DyQP2RfwP8X06cpkwDJJAwtYJWupYSq9MsNoWaXUnMsfL-Ej5EegsdABWmGLNzS2kNQxE_HFZB9JFrEMC04nRPjY8T-WVHgJeagtqxTV49pgu4_6xtmTBi8bwaj4tW3VSQ | **Perrysburg Musical Theatre Co.**PO Box 884, Perrysburg OH 43551 | www.perrysburgmusicaltheatre.org     |
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