## DISTRICT 7 THESPIAN SCHOLARSHIP AUDITION APPLICATION FOR HIGH SCHOOL SENIORS

This form must be complete or it will be disqualified. Seniors must have a minimum of a 3.0 GPA or 1190 (out of 1600) on the SAT or 26 on the ACT at the time of application to apply. Seniors auditioning in musical theatre must have a letter of recommendation from their sponsor stapled to the above left corner of this form.

Attach one recent photo, preferably a headshot. The photo should not be larger than this space. This photo is NOT optional.

District:	_ Troupe:				
NAME					_
Home Address					_
CityZIP					
Sex	AgeHeightHair Color				Verified by: -
Phone	e Graduation Year				
SCHOOL IN	IFORMATION	1			Name (Print) of School Official
School Name:					·
School Address					Title of School Official (Print)
City	ZIP				This of Concor Chicial (1 thit)
CANDIDAT	E INFORMAT	TON			
					Signature of School Official
Class Rank	Total in Class	Unweighted GPA	SAT Total	ACT	OFFICIAL SCHOOL SEAL
My Primary Interest is: (CHECK ONLY <b>ONE</b> )					MUST BE AFFIXED ABOVE
9	Musical Theatre	•	•	_	Theatre Education
ist honors, awa	ards, and special t	alents.			
	ve read and underst				www.flthespian.com for audition knowledge.
	Str			Stud	dent Signature
I nominateknown the candidate	ate for		as a candidate for T lent and nominate h		Thespian Scholarship/Audition. I have llowing reason:
				Spon	sor's Signature