

SCHOLARSHIP INFORMATION FORM

**Please fill in this information form and submit with your application.
Please attach one form with each scholarship you are applying for.
PLEASE PRINT LEGIBLY OR TYPE.**

NAME OF SCHOLARSHIP: _____

IF A PRODUCT (AUDIO, VIDEO OR SCRIPT) IS REQUIRED FOR THE
APPLICATION: WHAT COURSE(S) WAS THE PRODUCT PRODUCED FOR?

NAME OF APPLICANT: _____

STUDENT NUMBER: _____

THE YEAR OF THE PROGRAM and WHICH PROGRAM YOU ARE CURRENTLY
REGISTERED IN: _____

E-MAIL ADDRESS: _____