Application: The Deep River Players Theatrical Arts Bursary

Full Name of Applicant: _____

Address & Phone Number:_____

Email:_____

Parent/Guardian Name & Phone Number: _____

Proposed Post-Secondary Institution: _____

Proposed Program of Study:_____

Experience in School & Community Theatrical Productions (please indicate production, role/job you had and what you liked and/or learned from the experience. You can use the space provided, the back, or attach a separate piece of paper):

_____

_____

_____

Current Academic Standing (academic average for final year of studies): _____

Awards or Prizes earned:_____

Recommendation from Drama Teacher, Principal, Technical Supervisor or Director that speaks to your theatre experience, and why you should be considered for this bursary. Please use the space provided or attach a separate sheet.

_____

_____

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_____

Signature of Applicant:_____**Date:**_____

Please return the completed form by **June 1st** by mail or email:

adannedavies@gmail.com

If you have any questions, please email deepriverplayers613@gmail.com.