

## ALT Academy Scholarship Application- Spring 2025 \*DUE FRIDAY, December 6<sup>th</sup>\*

(Please Print or Type)

Age

1. Student Name

an additional essay.

2. Parent or Guardian	
4. City, State, Zip Code	
	Cell Phone
8. Current School	School Telephone
School Address	
City, State, Zip Code	
9. Please list ALT Academy class	ss(es) you are applying for below:
10. What method of transportation (Please note who will drive you	ion will be used to and from class?
for seeking scholarship as we	n of 100 words – Please explain reasons ell as reasons the ALT Academy ld consider this application. Include special

Scholarship applications should be turned into the ALT Box Office or emailed to harrison@amarillolittletheatre.org. <u>ALL</u> scholarship decisions will be sent to the email on this form by Sunday, December 8<sup>th</sup>. Applications submitted after the deadline will be considered on a rolling basis.

financial needs or problems. The Application Essay should be written from the student who would be attending ALT. Parents can also submit