



# 2019 PAPA Programming Scholarship Application (Classes)

Scholarship money is distributed based upon need and availability of scholarship funds. Applicants are not guaranteed assistance but every effort will be made to meet your request. We encourage our scholarship recipients to stay involved with the Youth Program throughout the year and volunteer when they can.

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone: \_\_\_\_\_

Parent name #1: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_

Parent name #2: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_

Parents are:      Living together      Living separate

Annual Household Income: (please circle one)

- |                                            |                                            |
|--------------------------------------------|--------------------------------------------|
| <input type="radio"/> \$15,001 to \$24,999 | <input type="radio"/> \$45,000 to \$55,000 |
| <input type="radio"/> \$25,000 to \$34,999 | <input type="radio"/> Over \$55,000        |
| <input type="radio"/> \$35,000 to \$44,999 |                                            |

Total number of people in household: \_\_\_\_\_

How much assistance are you requesting? \_\_\_\_\_

For which program are you requesting assistance? \_\_\_\_\_

**In an effort to get the student's input and awareness, we would like to have a short essay from the student:**

*Why do you want to participate in this specific PAPA Program? What do you hope you will gain from the experience?*

Return scholarship application to:  
Seacoast Repertory Theatre  
ATTN: PAPA Programming  
125 Bow Street  
Portsmouth, NH 03801