

UNIVERSITY of LOUISVILLE

COLLEGE OF ARTS & SCIENCES SOUTHERN INDIANA WORK SCHOLARSHIP IN THEATRE ARTS

WORK SCHOLARSHIP INFORMATION

This work scholarship is available to residents of Southern Indiana who are enrolled in the Bachelor of Science program in Theatre Arts at the University of Louisville. The work scholarship will provide \$2500 per semester paid directly toward tuition costs for up to 4 years. To qualify for this work scholarship, the student must:

- Be a resident of one of these counties in Southern Indiana: Floyd, Clark, Harrison, Scott, Crawford, or Washington County. *Note: residents of these counties are eligible for in-state tuition rates at the University of Louisville.*
- Be admitted to the University of Louisville and enrolled in the Bachelor of Science degree program in the Department of Theatre Arts.
- Be enrolled full-time in the Bachelor of Science degree program in Theatre Arts at the University of Louisville. *Note: for students wishing to pursue part-time enrollment, there may be some flexibility in accommodating a part-time schedule.*
- Remain in good academic standing with the University of Louisville.
- Work an average of 15 hours per week in the Theatre Arts costume shop and/or set design shop as determined by the Chair of the Department of Theatre Arts.

Please print

STUDENT NAME _____

SOCIAL SECURITY # _____ BIRTHDATE _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

PHONE _____ E-MAIL _____

MAJOR _____ UofL STUDENT # (if current student) _____

APPLICATION PROCEDURES

To apply for the scholarship please send this completed application form to:

Professor Garry Brown
Department of Theatre Arts
University of Louisville
Louisville, KY 40292

If you have questions about the work scholarship, please contact Prof. Brown at 502-852-8688 or grbrow01@gwise.louisville.edu

CERTIFICATION AND RELEASE OF INFORMATION

I certify that all of the information on this form is accurate and complete to the best of my knowledge. In accordance with the University of Louisville's Student Records Policy, I grant permission for information regarding my grades to be provided to the Selection Committee. My signature below indicates that I authorize this release of grades and other academic credentials to the Selection Committee.

Student Signature

Date