



Robert Alcorn Memorial Arts Scholarship 2010-11

Created in 1981 to honor one of the originating founders of Suffield Players, the scholarship makes Arts Education more accessible to deserving students to recognize the contribution of Robert Alcorn to the Suffield Players and is presented by The Suffield Players, Inc.

Eligibility

- A. Candidate must meet one of the following requirements:
 - Resident of Suffield, CT
 - Member of the Suffield Players
 - Relative of Resident of Suffield, CT
 - Relative of member of the Suffield Players
- B. Candidate must be a High School graduate for scholarship award (or within month)
- C. Candidate must be accepted at an accredited institution of higher learning or school / program for performing arts at time of scholarship award
- D. Candidate must be pursuing a study in some aspect of performing arts

Scholarship Details

- A. The Robert Alcorn Memorial Arts Scholarship is for post high school study at a program or institution of performing arts education within the United States approved by Suffield Players, Inc. The recipient must be accepted or enrolled as a student to receive his/her scholarship funds. The number and amount of the scholarship awards will be determined by the income derived from the annual operations of Suffield Players, Inc.
- B. The scholarship funds may only be used to defray necessary costs of the student's education (i.e. tuition, books & supplies, fees and/or equipment required by the student's particular place of study).
- C. The scholarship recipient may reapply for the scholarship annually.
- D. Candidate may be requested to come in for an interview / review of their arts work. Requests for interview / review are only in cases in which the Scholarship Panel needs additional information on which they will base their decision. Not all candidates are requested to come in and lack of request does not indicate a candidate's likelihood of scholarship award.
- E. Scholarship checks will be issued upon receipt of a confirmation of enrollment for the next class program or school session. Suffield Players will issue the check to the program or institution in which the student is enrolled unless prior arrangements as agreed upon by Suffield Players.

Application Procedures

- A. Complete the application form
- B. Write letter describing how meet eligibility requirements and include specifics about school and study program
- C. Provide a resume of past performing arts experience
- D. Write essay on future plans and how plans apply to the Performing Arts
- E. Mail application and all above materials with postmark no later than May 15, 2010 to:
 - Alcorn Scholarship
 - c/o The Suffield Players, Inc.
 - PO Box 101
 - Suffield CT 06078



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Application Form

Candidate's Name: _____ Birthdate ____ / ____ / ____

Parent / Guardians' Name(s) _____

Address: _____

Phone: _____ Intended Area of Study: _____

E-mail Address _____ Alternate E-mail _____

High School Attended _____ HS Graduation Date _____ GPA _____

Arts Class / School where scholarship would be used _____

Check eligibility status (*check all that apply*). Candidate is:

____ Resident of Suffield, CT

____ Member of Suffield Players

____ Related to Suffield Resident: _____, Relation: _____

____ Related to Suffield Player: _____, Relation _____

If you work during the year, please list places of employment and the type of work you do:

SEPARATE ATTACHMENTS

- ▶ **Personal Eligibility Statement:** Please attach to this application a one (1) page typed letter describing the candidate's dramatic arts class work and study program and why they deserve this scholarship.
- ▶ **Resume of Performing Arts Experience & Education:** Please attach to this application a typed resume outlining the candidate's performing arts experience & education to date.
- ▶ **Essay on Future Arts Goals:** Please attach to this application a typed one (1) to two (2) page essay on the candidate's goals and how this scholarship may help the candidate achieve those goals.
- ▶ **References:** Please include two letters of reference with your application and include their names and phone numbers below. One must be from an academic area and the second attesting to performing arts involvement.

Reference #1: _____ Phone: _____

Reference #2: _____ Phone: _____

CERTIFICATION

I have read and understand the eligibility requirements, completed the scholarship application, and attached the required documents. If selected as a scholarship winner and in consideration thereof, I understand, agree and hereby grant permission to Suffield Players, Inc. to use my likeness and name in announcing and promoting this scholarship program. I understand and agree that the Scholarship Selection Committee is solely responsible for the selection of the scholarship winners and its decision is final. I grant permission to the school of education which I attend to release information concerning enrollment status and academic standing to Suffield Players, Inc. for use in reviewing eligibility and, if awarded, administering scholarship award. In submitting this application, I certify that the information is complete and accurate to the best of my knowledge. I understand and agree that falsification of information will result in termination of the Robert Alcorn Memorial Arts Scholarship.

Candidate's Signature _____ Date _____