



Florida Theatrical Association Mr. & Mrs. Donald K. Yost High School Award

This award recognizes graduating Florida high school students who have demonstrated talent in the performing arts and who are pursuing post-secondary study in the field of theatrical arts. Awards will be given to students graduating in the 2011-2012 school year. Additional consideration will be given to students furthering their theatre education at a Florida-based post-secondary institution. Florida Theatrical Association will award stipends of \$500 each to individually qualified applicant.

ELIGIBILITY

To be eligible to receive a Mr. & Mrs. Donald K. Yost High School Award, an applicant must:

- 1) have successfully completed their high school education requirements at a Florida-based school.
- 2) have excelled in the theatre arts during their high school education.
- 3) plan to attend a post-secondary institution in the area of theatre arts, additional consideration will be given to applicants who plan to attend a Florida-based institution.

HOW TO APPLY

All applicants must submit the following by: **Wednesday, August 31st, 2011**

- 1) A complete application form.
- 2) A copy of the student's personal theatre narrative.
Support materials **MUST BE** submitted as part of the application packet. Suggested support materials are:
 - list of school & community theatre activities
 - letters of recommendation from theatre arts teachers and/or administrators (please include a minimum of 2 letters and a maximum of 4 letters)
 - copies of college/university letters of acceptance
- 3) Must live in one of these counties in Florida: Brevard, Broward, Dade, Lake, Orange, Osceola, or Seminole

All applications should be returned to:

**Mr. & Mrs. Donald K. Yost High School Award
Florida Theatrical Association
100 S Eola Drive, Suite 101
Orlando, FL 32801**



**F L O R I D A
T H E A T R I C A L
A S S O C I A T I O N**

Florida Theatrical Association
Mr. & Mrs. Donald K. Yost High School Award

SECTION A – General Information (please type entire application)

APPLICANT (Legal Name)		
PERMANENT ADDRESS		
CITY	STATE	POSTAL CODE
HOME PHONE NUMBER	E-MAIL ADDRESS	
DATE OF BIRTH	SOCIAL SECURITY NUMBER	
SEX:	MALE	or FEMALE
ARE YOU A U.S. CITIZEN?	YES	or NO



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SECTION B – High School Information

HIGH SCHOOL (full name)		
HIGH SCHOOL ADDRESS		
CITY	COUNTY	POSTAL CODE
PRINCIPAL'S NAME		
PHONE NUMBER	E-MAIL	
THEATRE ARTS SPECIALIST		
PHONE NUMBER	E-MAIL	
GRADUATION DATE		
TYPE OF HIGH SCHOOL (please circle)		
Public – General	Public – Performing Arts	
Private – General	Private – Performing Arts	



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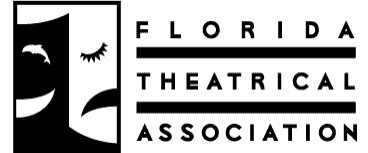
SECTION C – Post-Secondary Education Information

HAVE YOU BEEN ACCEPTED AND/OR ENROLLED IN A FULL-TIME POST-SECONDARY INSTITUTION AFTER HIGH SCHOOL?		
IF YES, PROVIDE THE NAME OF THE INSTITUTION		
ENROLLMENT DATE		
ADDRESS OF INSTITUTION		
CITY	STATE	POSTAL CODE
IF YOU ARE NOT CURRENTLY ENROLLED IN A FULL-TIME POST-SECONDARY INSTITUTION, WHAT INSTITUTIONS HAVE YOU APPLIED TO?		
IF YOU ARE NOT CURRENTLY PLANNING ON ATTENDING A FULL-TIME POST-SECONDARY INSTITUTION AFTER HIGH SCHOOL, WHAT ARE YOUR PLANS?		

SECTION D – Support Materials

Please include the following with application packet:

- 1) Resume
- 2) Awards & recognitions
- 3) Photograph of applicant (at least 5 x 7 size)
- 4) Letter(s) of acceptance from colleges/universities
- 5) Letter(s) of recommendation (from those listed in Section B)
- 6) Video, portfolio or additional support materials if available



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SECTION E – Student Narrative

Please provide a short narrative about yourself including your education, involvement with theatre projects and plans for the future. Attach an additional page, if necessary.

SECTION F – Faculty Certification & Compliance Statement

As this applicant's primary theatre advisor, I certify that the information contained in this application, including all attachments and support materials, is true and correct to the best of my knowledge and that I will abide by all legal, financial and reporting requirements for scholarships received from Florida Theatrical Association.

Signature

Date

Name (Printed)

SECTION G – Student Certification & Compliance Statement

I certify that the information contained in this application, including all attachments and support materials, is true and correct to the best of my knowledge and that I will abide by all legal, financial and reporting requirements for scholarships received from Florida Theatrical Association.

Signature

Date

Name (Printed)