

2024 Scholarship Application

(Must be postmarked by February 14, 2024

Name:	Date of birth:		
School (academic) current	ly attending:		
Address:			
City/State/Zip:			
Please list all potential pro		dering attending:	
		ny of these programs?	
of your call, please inform us of	of any monetary assistan	ed by: ust call 913.662.2532 as soon as p nce. Applicants cannot be consid will be considered for scholarship	ered until this is
Parent/guardian's name:			
I/We have read the Scholarship Int	roduction Letter and agree	e to the terms listed.	
Applicant signature	Date	Parent/guardian signature (for applicants under 18)	Date
		submission along with this co ns will not be accepted, and y	
	als, and name one person ember, etc.) and why. d to YouTube (see crite	500 words (but no more than 1000 n who has inspired you to pursue yo eria)	
 Resume (including dance Headshot (professional p Repertoire list (not required) 	photo preferred but not n	usical theatre experience) nandatory)	

• **\$10 nonrefundable application fee** made payable to "Legacy Foundation for the Arts"

Additional items may need to be submitted separately – see criteria for details.