

UNIVERSITY OF NEBRASKA AT OMAHA
Department of Theatre Scholarship Application
For Incoming Students
Submission DEADLINE: First Monday in March, 5:00 p.m.

Please complete this form and return it along with **two (2) letters of recommendation from teachers or mentors, and a copy of your acting, directing, or technical resume** and any other materials you feel will help the committee make their decision.. If you are a transfer student from another college, please attach a copy of your transcript or degree audit. Return all materials to:

College of Communication, Fine Arts and Media
Theatre Scholarship Committee
University of Nebraska at Omaha
WFAB 315, 6001 Dodge Street
Omaha, Nebraska 68182-0189

Students *must be* ***ADMITTED*** to the *College of Communication, Fine Arts and Media* as a ***Theatre major to be eligible*** for Theatre scholarships.

Name _____ SID# _____

Address _____ Phone _____

City _____ State _____ Zip Code _____

e-mail _____ Nebraska resident? Yes / No

Current School _____

High School (if different from above) _____ Graduation Date _____

Anticipated first semester at UNO: ____Fall ____Spring ____Summer 20____

Select major area of interest:

____ Performance ____ Directing ____ Design/Technical Theatre

____ Stage Management ____ Playwriting ____ Scholarship

An audition/interview/portfolio review is required for Theatre scholarship consideration. Auditions will be held on a Saturday in March. A representative from our Theatre Department will contact you to set up YOUR audition time.

If you are auditioning, select two contrasting pieces, no more than 3 minutes total.

Please complete the information on the back of the form.

List school or other activities, clubs or organizations, art exhibits, plays, musical ensembles, in which you have participated (use separate sheet if necessary):

List honors or awards you have received (use separate sheet if necessary):

List any other information you think would be helpful in determining your eligibility for a scholarship.

DEADLINE for SUBMISSION: First Monday in March, 5:00 p.m.

If you are the recipient of a scholarship, you will be contacted by mail in early May.

To be completed by High School Guidance Counselor:

This student has a G.P.A. of _____ on a _____ scale,
and ranks _____ out of _____ in his/her class.

This student received a composite ACT score of _____.

Test taken as a ____ Junior or ____ Senior.

OR (if applicable) Current College Advisor:

This student has a cumulative college G.P.A. of _____
and has completed _____ quarter/semester (circle one) hours of college credit.
ACT composite score: _____, taken in the year _____.

Name _____ Title _____

Signature _____ Date _____