
APPLICATION FOR THE EIGHTEENTH ANNUAL JULIE PEIERLS SCHOLARSHIP

PLEASE COMPLETE THE FOLLOWING APPLICATION (TYPE OR PRINT). WHEN YOU HAVE COMPLETED THE APPLICATION, PLEASE RETURN TO THEATRE THREE, ATTENTION: JULIE PEIERLS SCHOLARSHIP COMMITTEE, PO BOX 512, PORT JEFFERSON, NY 11777. UPON RECEIPT OF THE COMPLETED APPLICATION, YOU WILL BE CONTACTED TO SCHEDULE AN AUDITION AND INTERVIEW TO BE HELD IN JULY 2017.

AUDITION REQUIREMENT WILL BE A TWO TO FOUR MINUTE MONOLOGUE OF YOUR CHOICE.

NAME _____

STREET ADDRESS _____

TOWN/ZIP CODE _____

TELEPHONE NUMBER _____

E-MAIL _____

SCHOOL _____

PLEASE ANSWER THE FOLLOWING QUESTION ON SEPARATE PAPER. MAKE SURE TO PUT YOUR NAME AND TELEPHONE NUMBER AT THE TOP OF THE PAGE.

PLEASE SHARE WITH US A CHALLENGING OR DIFFICULT EXPERIENCE YOU HAVE HAD IN THE THEATRE—ONE FROM WHICH YOU FEEL YOU HAVE GROWN. PLEASE EXPLAIN WHAT YOU FEEL YOU LEARNED AND HOW YOU HAVE OR MIGHT APPLY THIS LESSON IN THE FUTURE.