



PO Box 319 ① 500 West Eaton Street ① Trenton, TN 38382
Phone 731.855.2129 ① Email: nitelitetheatre@gmail.com
Website: nite-litetheatre.org

Mail to: Nite Lite Theatre, PO Box 319, Trenton, TN 38382
Attn: Scholarship Committee

BIOGRAPHICAL INFORMATION

Name: _____
Address: _____
City _____ ST _____ Zip Code _____
Telephone (home) _____ Telephone (cell) _____
Email: _____
S.S.# _____ Age: _____ Birthday _____

FAMILY INFORMATION

Parent/Guardian Name: _____
Address: _____
Telephone (home): _____ (work) _____ (cell) _____

EDUCATIONAL INFORMATION

Name & Address of High School: _____

Graduation Date: _____ Grade Point Average: _____
College Attending &/ or Plan to Attend: _____
Status for 2024-2025 School Year: Beginning _____ Currently Enrolled _____
Re-Admission _____ TSF _____
Student Level 2024-2025: Freshman _____ Sophomore _____ Junior _____
Senior _____ Graduate _____
Proposed Occupational Profession _____
Expected College Major _____
(Use Additional Paper if Needed)
Have you applied for, or expect to receive, a scholarship or aid from any other source? _____

If yes, give details _____

Training/Instruction Received in Arts (School Related) _____

Training/Instruction Received in Arts (Non-School Related) _____

Performance/Productions (roles or production assistance) **Not Nite Lite Related**

HONORS, ORGANIZATIONS, ACTIVITIES

High School: _____

College: _____

Community _____

I certify that all of the above information is true, and that I have not knowingly withheld any pertinent information. I also certify that any funds received resulting from this application will be used for educational purposes only.

Name of Applicant _____ Date: _____

Name of Parent/Guardian _____ Date: _____

Don't forget the typed statement of accomplishments, future plans, fields of study and career goals; and the three letters of endorsement. One from an instructor and two from persons in the community who are NOT related to you.