



# Mystic Vision Players Continue the Vision Scholarship Application



**\*\*Applicants must have participated in at least one Mystic Vision Players production in order to be eligible for scholarship\*\***

**\*\*Awards are available only for non-Linden High School Seniors.**

**LHS students should contact the Guidance Office for applications to the Rose Scholarship**

**Please include the following information:**

1. Academic Record: A copy of the student transcript, academic record, or report card from classroom teacher.
2. Student Essay: In 500 words or less, explain how engaging in the performing arts has affected you and how you can apply your experiences to your future academic goals.
3. Past Performing Arts experience: Include all performances and dates.
4. Written Recommendations: Must be provided by one Performing Arts teacher AND one Classroom teacher.

***MAIL ALL INFORMATION TO:  
MYSTIC VISION PLAYERS  
ATTN: SCHOLARSHIP COMMITTEE  
P.O. BOX 3115  
LINDEN, NJ 07036***

**APPLICATION MUST BE POSTMAKRED BY: April 15, 2022**

**Scholarship recipients will be notified by letter no later than May 6<sup>th</sup>, 2022**

# *Continuing The Vision Scholarship Form*

**PERSONAL INFORMATION:**

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DAYTIME PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

SENIOR CLASS RANK: \_\_\_\_\_ SAT SCORES: \_\_\_\_\_

ACTIVITIES: PLEASE ATTACH SEPARATE SHEET LISTING ALL EXTRA CURRICULAR ACTIVITIES INCLUDING ANY WORK HISTORY, COMMUNITY SERVICE, SCHOOL, AND OTHER ORGANIZATION ACTIVITIES

PERFORMANCE HISTORY: PLEASE ATTACH SEPARATE SHEET LISTING ALL PERFORMANCE HISTORY

AWARDS RECEIVED: \_\_\_\_\_

\_\_\_\_\_

**COLLEGE INFORMATION:**

COLLEGE/UNIVERSITIES APPLIED TO: \_\_\_\_\_

\_\_\_\_\_

EXPECTED COST FOR YOUR SCHOOL OF CHOICE: \_\_\_\_\_

COURSE OF STUDY: \_\_\_\_\_

HAVE YOU BEEN AWARDED ANY SCHOLARSHIPS OR FINANCIAL AID: YES \_\_\_\_\_

NO \_\_\_\_\_

IF YES, PLEASE LIST: \_\_\_\_\_

\_\_\_\_\_

**FAMILY INFORMATION**

DO YOU HAVE BROTHERS OR SISTERS? PLEASE LIST NAMES, AGES, AND WHERE THEY ATTEND SCHOOL.

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FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME: \_\_\_\_\_

FAMILY ANNUAL INCOME: \_\_\_\_\_

SIGNATURE OF STUDENT: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT: \_\_\_\_\_ DATE: \_\_\_\_\_