

THE MARILYN GRIGAS Tuition Scholarship Application

| NAME: | | | | |
|--|--------------------------------------|--|---|--|
| EMAIL: | | | | |
| ADDRESS: | | | | |
| (Street City State Zip) | | | | |
| TELEPHONE Home: (|) | TELEPHONE Cell: | () | |
| NAME OF PARENT(S) or | GUARDIAN(S): | | | |
| MAILING ADDRESS: | | | | |
| (if different from above) | | | | |
| CURRENT GPA: | RRENT GPA: AMOUNT OF REQUEST: | | | |
| Please include the following 1. An essay from the appling 2. Any other supporting resonance. The recipient agrees to allow the support of the | cant which provides a commendations. | | or press releases and for publicity purposes. | |
| Applicant Signature: | | D | Date: | |
| | Completed app | olication should be sent to: | | |
| The Marilyn Grigas Scholarship Fund c/o Long Bay Symphony Guild | | | | |
| | | Ave N., Suite 310-E Beach, SC 29577 | | |
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| Application Guidelines | | | | |

- 1. All fees must be current.
- 2. Deadline for submission is at least **one month prior to need**.
- 3. The Scholarship Committee will base their decisions on the following criteria:
- Need Merit Rehearsal and performance attendance

Awards received must be used for tuition.