



Lee Strasberg 50th Anniversary Scholarship

APPLICATION FORM

Please e-mail application and requirements to youngactors@strasberg.edu
or mail application and requirements to
Young Actors at Strasberg Scholarship
115 East 15th Street, New York, NY 10003

PERSONAL INFORMATION

LEGAL NAME

Last Name:

First Name:

Middle Name:

MAILING ADDRESS

Street Address:

City:

State:

Zip:

Country:

Date of Birth (mm/dd/yyyy):

Grade:

Gender:

E-mail:

Home Phone:

Cell Phone:

How did you learn about Young Actors at Strasberg?

PARENT/GUARDIAN CONTACT INFORMATION

Name:

Telephone:

E-mail:

Relationship:

APPLICATION REQUIREMENTS

Please include all the following items with this completed application form. Your application will not be complete until all of these items are received exactly as described. Send the completed application packet via postal mail or email youngactors@strasberg.com and add Attn: Young Actors Scholarship in the subject line

All Applicants:

- One Photo (Headshot or any photo).
- One Letter of Reference that speaks to the student's character. This may be from teachers, coaches, artistic professionals, academic advisers or anyone who knows the applicant from a position of authority or instruction. Family members are not preferred. Letters should be typed in English, signed, dated and contain contact information. Letters cannot be more than six months old.
- An Essay (250 words or more typed) describing your goals in the field of acting and why you wish to study at Young Actors at Strasberg.
- Verification of Previous Studies recorded by whatever method your primary education institution employs each semester/quarter (i.e. report card, progress reports, mid-term grades, or partial transcripts) from middle school and/or high school studies. All submitted documentation must be in English or accompanied by an official, notarized English translation if issued in another language.

I certify that to the best of my knowledge that the foregoing information I have provided on this application is accurate and correct.

Name:

Signature or E-Signature: Date:

FOR OFFICIAL USE ONLY:

Date Application Received: Received by:

Interview Date: Interviewed by:

Accepted: YES NO