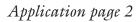


APPLICATION FOR FINANCIAL AID

The objective of The Allied Arts, Inc. is to aid students of exceptional talent in one of the arts at the graduate or equivalent level. Grants are awarded to those who seek to become professional in their chosen fields.

Please print clearly or type.	Date of Application		
Name		Date of Birth	
Address			
City	State	Zip	
Phone	Email		
State professional specialization: music, theater, fine arts, etc.			
Number of years in this area of the arts?			
College last attended and graduation date?			
Other college attended			
List activities in which you participated.			
Special honors received.			
List amateur experience.			
List auditions, competitions or juried shows in which you have participated			
Are you at present working in your area of the arts? If so, give details.			
Please state the purpose for which you are applying for financial aid. Include your	future plans and ambi	tions.	





Have your applied for grants from other organizations?		
If so, please give details.		
Are you at present receiving aid from another organization?		
If so, please give details		
Is family assistance available to you?		
State your projected income from all sources for the coming year		
Please give other information you believe to be of consequence to	o the Board of The Allied Arts, Inc.	
Please list three individuals whom you have requested to write le advancement in your chosen profession.	tters to us concerning your character, talents and qualifications for	
1. Name	Email	
Address		
2 Name	Email	
Address		
3. Name	Email	
Address		
With this application, please also submit a head shot of yours Letters and this application should be mailed to: Linda Young, Pr Postmarked deadlines for submission of applicati		
Inquiries about applications can be directed to: Linda Young at 3 Grants are not available for tuition.		
The above statements are true and correct to the best of my know	rledge.	
Applicant's signature	Date	