

CARROLLWOOD PLAYERS, INC
4333 GUNN HIGHWAY
TAMPA, FL 33624
265-4000

SCHOLARSHIP APPLICATION

NAME _____

MAILING ADDRESS _____

PHONE NUMBER _____

E-MAIL ADDRESS _____

NAME/CITY/STATE OF COLLEGE _____

HAVE YOU BEEN ACCEPTED? ATTACH COPY OF ACCEPTANCE LETTER _____

DEGREE/MAJOR/MINOR? ATTACH PROOF _____

GRADE POINT AVERAGE (GPA) ATTACH COPY OF LAST REPORT CARD (HIGH SCHOOL OR COLLEGE)

ATTACH A 250 WORD ESSAY EXPLAINING WHY YOU ARE DESERVING OF CONSIDERATION FOR A SCHOLARSHIP _____