

SCHOLARSHIP APPLICATION



STUDENT INFORMATION

Name: _____
School Name: _____
Grade: _____
Address: _____
City, State: _____
Zip Code: _____
Home Phone: _____
Email: _____

Indicate your 1st and 2nd choice workshop:

- ___ Advanced Claymation 7/19 - 7/23
- ___ Claymation 6/14 - 6/18
- ___ Claymation 6/21 - 6/25
- ___ Claymation 7/12 - 7/16
- ___ Comedy Shorts 6/28 - 72
- ___ Comedy Shorts 7/26 - 7/30
- ___ Script-to-Screen 6/14 - 6/25
- ___ Script-to-Screen 7/12 - 7/23
- ___ Script-to-Screen 8/2 - 8/6

Ethnicity:

This information is used solely for statistical purposes in preparing applications for the grants programs that help underwrite the Summer Film Camp.

- African American
- Native American
- Asian/Pacific American
- Latino/Hispanic/Chicano American
- European American
- Bi/Multi-Racial
- Other Specified Ethnic Group: _____

Attach a separate sheet, if necessary, but responses to all three of the below should not exceed one page:

- 1) Honors, Scholarships and Awards: _____

- 2) Work Experience: _____

- 3) Film Education/ Prior Film Experience: _____

PARENT INFORMATION

Name: _____ Check here if your address is the same as the student.
Address: _____ City, State: _____ Zip Code: _____
Phone: _____ Alt Phone: _____
Email: _____

What was your approximate household income in 2009? _____

Number of children in your family? _____

How did you learn about this scholarship program? _____

STUDENTS, the following must also accompany this application:

- A personal essay (not to exceed one 8.5 x 11 page, double-spaced) explaining the following:
 - How receipt of this scholarship will help you meet personal and/or educational goals.
 - What you hope to learn at the Summer Film Camp.
 - How this will fit into your short and/or long-term goals.
 - Anything else you would like us to know related to attending this camp.

- A letter from your parent(s)/legal guardian(s) explaining his/her/their financial situation and need for this scholarship.

- Two letters of recommendation from non-family members (include contact information for references).

- An official transcript from the middle school or high school you currently attend.

- If applicable, a letter from the middle school or high school you currently attend attesting to your financial eligibility.

****Incomplete applications will NOT be processed. ****

SUBMITTING YOUR COMPLETE APPLICATION

Mail or fax COMPLETED applications to:

Austin Film Festival - Summer Film Camp
1801 Salina Street
Austin, TX 78702

fax 512-478-6205

FOR MORE INFORMATION

Alissa Ziemianski
Director, Young Filmmakers Program
512-478-4795
alissa@austinfilmfestival.com
www.austinfilmfestival.com/new/summer_camp