



COMMUNITY FOUNDATION
FOR NANTUCKET

For the **upcoming** academic year,
I will be a: (check one)

- Freshman
- Sophomore
- Junior
- Senior
- Post Graduate Student
- Other

Chris Witte Memorial Scholarship

Description: The Chris Witte Memorial Scholarship was established to celebrate Chris’s passion for theatre and the arts. It hopes to encourage the next generation of multi-talented Islanders to explore off the beaten path and pursue a creative future. Chris arrived on Nantucket in 1972. Over the course of the next 47 years, Chris, with his legendary and contagious laugh, became a beloved part of the island’s fabric. A master mechanic, and an exceptional actor, he appeared in numerous productions on Nantucket stages.

Purpose: To provide scholarships to a passionate, hardworking, and honorable Nantucket Community Member who is pursuing training or an education in the Theater Arts. Scholarships are only available to individuals attending an accredited or professional performing arts training program, college or university.

Required: Application, transcript, and any other supporting materials which you feel would be helpful.

Personal Data:

Name: _____
(Last) (First) (Middle)

Mailing Address: _____
(Street or PO Box) (City) (State) (Zip)

Physical Address: _____
(Street) (City) (State) (Zip)

Telephone: _____
(Cell Phone) (Home Phone)

Email Address: _____

Best Way to Contact: Cell Phone Home Phone Email

Parent(s)/Guardian(s) Name(s): _____

Parent(s)/Guardian(s) Address (if different from yours): _____

Best Way to Contact Parents: _____

Parent(s)/Guardian(s) Marital Status: Single Married Divorced Widowed

Academic Data:

Only required if applicant is currently enrolled in High School or a Postsecondary Educational institution.

Name of High School: _____ Year of Graduation/ GED: _____

(If you are in college, please attach current transcript.)

Names of Colleges or Professional Performing Programs you have applied to or have been accepted to:

College, University, or professional performing programs you plan to attend:

Why do you want to attend this school or training?

What is your intended field of study? _____

Why should you be chosen as the recipient of the Chris Witte Memorial Scholarship? *(Applicants may attach a separate page if more room to respond is needed.)*

What draws you to theatre? (*Applicants may attach a separate page if more room to respond is needed.*)

School and Community Involvement:

List any organization in which you have been a member or jobs in which you have been employed. Organizations may include artistic, academic, athletic, civic, religious or social groups. Jobs may also include volunteer work or internships. Attach another sheet if necessary.

List activity, number of years participated, and positions or offices held:

List any awards, honors or recognition received:

Which of the above experiences has been most important to you and why?

Anticipated Costs for the Upcoming Year

	Costs
Tuition & Fees	\$
Room & Board	\$
Books & Supplies	\$
Personal Expenses (Travel, computer, etc)	\$
Other	\$
TOTAL COST OF ATTENDANCE	\$

Estimated Amount You Can Pay Towards Costs for the Upcoming Year

Parent/Guardian	\$
Self	\$
Financial Aid Award from School of Choice	\$
TOTAL FUNDS AVAILABLE FOR COLLEGE	\$

Do you plan to work during the summer? _____ Where? _____

Do you plan to work during the school year? _____ Where? _____

If there are special financial circumstances which will affect your education, please describe:

Student's and Parents' Statements:

I have checked this application for errors and omissions and state that the information on this application is complete and accurate.

Scholarships may not be awarded to any donor/advisor or substantial contributor to the Fund making the award, to any member of a selection committee for such award, or to any members of their families. Applicants must also attest to not being related to either a significant donor or advisor of the scholarship for which they are applying. This includes parents, grandparents, great grandparents, spouse, siblings, children, grandchildren, great grandchildren and the spouses of all of the above.

Applicant's signature _____ Date _____

Parent's signature _____ Date _____

Please submit by **9AM on April 29, 2020**
Community Foundation for Nantucket
PO Box 204
Nantucket, Massachusetts 02554
-or- cjensen@cfnan.org