



Scholarship Application Form

NOTE: Applicants must contact the NSTT well in advance of deadlines for guidance and to confirm materials are all on file and have arrived. Applicants **will not** be contacted if any part of an application is missing. Incomplete applications will not be reviewed. Phone: (902) 233-4304 E-mail: nstt.scholarship@gmail.com

Type or print legibly in black ink. DO NOT write on reverse side. Add additional pages if needed.

SECTION I: IDENTIFICATION

1. Name: _____
2. Permanent Nova Scotia mailing address:
Street/Box # _____
City, Prov. _____ Postal Code _____
Phone # _____ E-mail _____
3. If you are living away from your permanent Nova Scotia address:
Phone # _____
4. Date of Birth: _____
5. If you are under 18 years old, please complete the following:
Names of Parents/Guardians: _____

SECTION II: ARTISTIC DISCIPLINE

1. Please "X" the discipline in which you will be studying:
Dance Film & Video Interdisciplinary Literary Arts Music Theatre
Design/Applied Craft Industry-Based Technical Arts Visual Arts/Fine Craft

Please identify your area of specialization within your discipline: (i.e. if Music, state Piano; if Industry-Based Tech Arts, state Stage Management)

2. How many years of formal instruction have you had in this discipline?

SECTION III: FUNDS REQUESTED

Please state the dollar amount you are requesting, from Budget, Page 5. \$ _____
(Requesting funds for the full cost of your studies is not appropriate.)

SECTION IV: RESIDENCY REQUIREMENT

I have been a full-time resident of Nova Scotia for at least 1 year prior to submitting this application. Yes No

I am eligible to receive support from another province in Canada Yes No

I am a Canadian citizen or a landed immigrant.* Yes No

(* If you are a landed immigrant, you must attach a copy of your landed immigrant status.)

You must provide a completed copy of Pages 2-3 to all referees. If you are applying for both the April 15 **and** June 1 deadlines you may request that the same references be used for both applications; however, the referees **must speak to proposed programs of study for both summer and fall.**

SECTION V: PROPOSED PROGRAM OF STUDY

1. Name of: a) proposed school or b) private teacher* _____
 Geographic location: City/Province/Country _____

(*If private teacher, attach a letter from your teacher stating he/she agrees to provide instruction, outlining the duration and frequency of contact. The teacher's résumé must be submitted.)

2. Name or nature of proposed program: (i.e. B.A. Theatre Major or Private Study - Voice)

3. Have you received an acceptance letter yet for this program of study? YES NO

Acceptance letter attached to this application.

Send acceptance letter when it becomes available.

4. Study term you are applying for: Summer Fall/Winter
 Start Date _____ End Date _____
If applicable: Full program length (i.e. 4 years) _____
 Year applying for (i.e. Year 2) _____

Attach a copy of the course outline or program description to your application, as provided by the school, teacher or mentor.

5. Why is participation in this program important at this stage in your development?

6. What are your long-term **artistic** goals and objectives?

SECTION VI: EDUCATION, AWARDS AND EXPERIENCE

If there is not enough room below to answer the following questions, please attach a separate sheet.

1. **Artistic development:** List the names of teachers under whom you have studied, mentors with whom you have worked, and courses or programs you have attended in your artistic discipline.

Name of teacher /mentor /course

Dates when instructed

2. **Academic background and other training:** List your academic background and any other non-arts training you have received.

School Attended

Level Achieved

Calendar Year Completed

3. **Awards:** List awards you have received, including all previous Talent Trust Scholarships.

Award

Date Received

SECTION VIII : BUDGET (ONLY PERIOD FOR WHICH YOU ARE APPLYING, I.E. SEPT. 3, 2009 - APR. 25, 2010)
 Use additional sheet if needed and attach to application. **SHOW ALL COSTS IN TERMS OF CANADIAN DOLLARS.**

EXPENSES

Tuition or course fee (send receipt when available) _____

Books, supplies, etc. (estimate) _____

Travelling expenses (estimate) _____

Living expenses during course of study (estimate) _____

Other (specify) _____

TOTAL EXPENSES: _____

REVENUES

Other scholarships or grants for coming year* _____

Personal funds _____

Support from family _____

Student Loan _____

Other (Specify) _____

SUBTOTAL: _____

Amount requested from the Talent Trust: _____

TOTAL REVENUES: _____

Total Revenues should equal Total Expenses. **Requesting funds for the full cost of your studies is not appropriate.**

*Other scholarships or grants, requested or confirmed:

<u>Name of program or funding source</u>	<u>Amount requested</u>	<u>Confirmed</u>
	\$	YES <input type="checkbox"/> NO <input type="checkbox"/>
	\$	YES <input type="checkbox"/> NO <input type="checkbox"/>

Are you eligible to apply to the Department of Tourism, Culture and Heritage's Grants to Individuals Program? YES NO

Do you wish to be considered for a bursary based on financial need? YES NO

SECTION IX: APPLICATION CHECK LIST

Have you included the following in your application?

- A completed application form
- If applicable, a copy of your landed immigrant status
- Verification of acceptance into your program of study
- If proposing private study - a letter from your teacher stating that he/she agrees to provide instruction outlining the duration and frequency of contact
- If applicable, a copy of the teacher's résumé must be submitted
- A copy of the course outline or program description, as provided by the school, teacher, or mentor
- 3 completed references forms to be sent directly by the referees
- Additional sheet with the names of teachers under whom you have studied, mentors with whom you have worked, and courses or programs you have attended in your artistic discipline
- Additional sheet with academic background and any other non-arts training you have received
- Additional sheet with awards you have received, including all previous Talent Trust Scholarships
- Additional sheet with experiences and/or achievements relevant to your artistic development
- If 18 years of age or older - a current copy of your résumé
- Additional sheet with other scholarships or grants, requested or confirmed
- A submission of artistic work prepared following the *Guidelines for Support Material*

I certify that the information contained in this application is correct to the best of my knowledge.

Signed: _____ Date: _____

(Signature of applicant's parent or guardian, if applicant is under 18 years of age)

Send completed original signed applications and support material to:

Nova Scotia Talent Trust (NSTT)
Mailing Address: PO Box 456, Halifax, NS, B3J 2R5
Street Address: 1800 Argyle Street, Suite 601, Halifax, NS, B3J 3N8
FAX (*Reference Forms* only): 902-424-0710