



2019 Fine Arts Scholarship Application Sponsored by Imagine Design

The Manassas City Public Schools Education Foundation, Inc. is pleased to offer a \$2,000 scholarship to a graduate of Manassas City Public Schools who plans to pursue studies in an artistic field (art, music, theatre, etc.).

Eligibility

The applicant must be a 2019 graduating senior of Manassas City Public Schools who intends to graduate from a four year college or university with a degree in an artistic field of study.

The Applicant

- Must be accepted to a four-year college or university to pursue their artistic field of study by June 29, 2019.
- Must have participated in extracurricular activities (clubs, sports, school, church/faith based organizations or community groups) or employment while in high school.
- Must submit with his/her application an essay, up to 500 words, describing experiences that have led to pursuing this field of study and the importance of the arts.
- Must submit a recommendation from one teacher, one employer or one arts community representative.

Deadline

Applications must be typewritten and received by **April 5, 2019**. Applications cannot be faxed and late applications will not be accepted. Completed applications may be hand delivered, mailed or emailed to one of the addresses below.

Hand deliver to:

MCPS Education Foundation, Inc.
c/o MCPS
8700 Centreville Road, Suite 400
Manassas, VA 20120

Mail to:

MCPS Education Foundation, Inc.
c/o MCPS
P.O. Box 520
Manassas, VA 20108

Email to:

info@mcpsedfoundation.org

If mailed, the post-marked date must be no later than April 5, 2019.

The Manassas City Public Schools Education Foundation Scholarship Committee will select and announce the recipients in May, 2019.

The scholarship award shall be based on merit and qualifications and shall not discriminate against any person on the basis of sex, race, religion, handicap or national origin.

STUDENT NAME _____



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Part I (Please type)

Name _____
Last First Middle

Home Address _____

Home Telephone Number _____

Date of Birth _____

Father's Name _____

Mother's Name _____

High School _____

Guidance Counselor _____

Cumulative High School GPA: _____ Rank in Graduation Class _____ Out of _____
(number in class)

Date of Graduation _____

Name of the College or University _____

Address _____

Method of Payment

If you are awarded this scholarship, a check will be forwarded to the school that you will attend upon confirmation of your enrollment and acceptance into the program. Please indicate to which account you would prefer your scholarship award to be applied:

Tuition Room and Board Textbooks and supplies

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Part III – Community/Employment Activities and Awards

Please list the activities that you have been involved in, the awards that you have received and the positions of employment held in your community. Please include your grade level at the time of your involvement in the activity, award or employment. **Please type.**

ACTIVITY/AWARD	CLUB/ORGANIZATION ASSOCIATION	GRADE (9,10,11,12)

STUDENT NAME _____



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Part IV – Essay *(Please type)*

On a separate piece of paper, please type an essay, up to 500 words, describing experiences that have led you to pursue this artistic field of study and the importance of the arts. Please put your full name on the bottom of the essay page.

Essays not on the topic and/or exceeding the word limit will NOT be considered.

Part V – Recommendation Letters

- Each applicant must submit one recommendation from a teacher, employer or arts community representative.

On the following pages, you will find the "Recommendation Letter Form" which must be completed by this professional.



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SCHOLARSHIP RECOMMENDATION LETTER FORM

This student is applying for the Fine Arts Scholarship. This scholarship is intended to recognize and reward motivated students who are interested in pursuing a degree in an artistic field of study. The Scholarship Committee appreciates your evaluation of this scholarship applicant's strengths.

Please complete the recommendation form below. Your comments are critical to the decisions of the committee. Attach additional sheets of paper if you require more space. Your letter will not be confidential. Please return your completed recommendation form to the applicant for submission with the scholarship application packet.

Recommendation from _____

Phone/Ext # _____

Title _____ Company _____

Signature _____ Date _____

Period of association From date: _____ To date: _____	Professional relationship to applicant (check appropriate boxes) Teacher Supervisor Organization Name _____
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STUDENT NAME _____



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SCHOLARSHIP RECOMMENDATION LETTER FORM

Applicant evaluation

Element	Out-standing	Above Average	Average	Below Average	No Basis for rating
Leadership					
Creativity: flexibility, adaptability					
Emotional Maturity: ability to work with and for others and reaction to set-back					
Initiative: motivation and self-starting					
Sense of humor					
Responsibility: accepting and distributing credit and fault					
Communication skills					
Reliability: ability to work independently and dependability in completing assignment					
Resourcefulness: ability to solve problems					

Describe the student's strengths.

Provide specific examples of the applicant's interest in arts.

Provide any other comments about the applicant that you feel the committee should know.

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Photographic Consent Form

The undersigned does hereby authorize

Manassas City Public Schools Education Foundation

and/or its associates, assistants or subcontractors to photograph/film

_____ .
Student name

The undersigned authorizes Manassas City Public Schools Education Foundation to permit the use and display of said photographs in any publication, multimedia production, display, advertisement or World-Wide Web publication.

The undersigned agrees that Manassas City Public Schools Education Foundation may use name, likeness or biographical information supplied by the undersigned.

The undersigned releases and forever discharges Manassas City Public Schools Education Foundation, its board members and employees from any and all claims and demands arising out of or in connection with the use of said photographs/images including, but not limited to, any claims for invasion of privacy or defamation.

Accepted and Agreed:

Signature of Student

Signature of Parent/Guardian

Signature of Witness

Date

STUDENT NAME _____