



# CMT Scholarship Program Description... PAGE 1

Children's Musical Theater San Jose (CMT) grants two types of need-based scholarships to those families who are unable to afford the tuition for its programs. The intent of the Scholarship Program is to give performance opportunities to youth who may not otherwise be able to afford it. Scholarships may be limited for some programs, but CMT will award as many as it is able.

## Work Scholarship (Full or Partial):

- Work Scholarships allow anyone for whom tuition would be a financial burden to **“earn” their tuition by working for CMT in a volunteer capacity** for an agreed upon number of hours.
- A participant may request a Full Work Scholarship or specify the amount they feel comfortable paying and request a Partial Work Scholarship to cover the difference. Full Scholarships cover the entire cost of tuition. Partial Scholarships require the **balance of tuition costs be paid at the time of audition or enrollment**. No exceptions.
- Work Scholarship recipients must sign a contract agreeing to give **1 hour of volunteer work for every \$10 awarded** (note, number of required work hours may vary for training programs). Work may be completed by the recipient (if 18 or older), and/or any other member of his or her immediate family. If the work is not completed, by the last day of the production or class, the recipient will be **ineligible for any future scholarships**.
- Work Scholarship recipients will be provided with a timecard along with their signed Scholarship Contract. It is **the recipient’s responsibility to keep track of their own volunteer hours** and get all hours approved by the CMT staff person or lead volunteer who is supervising the work.
- All Scholarship recipients are required to submit a **one-page typed letter (to CMT)** at the conclusion of the program, describing how they and/or their family were able to benefit from their participation with CMT. Reports may be used by the fund-raising or marketing departments to promote CMT’s scholarship program or solicit donations to support the program. You may request to remain anonymous if materials from your report are quoted. **The report must be written by the participant**, not a parent or other family member. The report is due on the final day of the production or class. If the report is not turned in by the final day, the recipient will be **ineligible for any future scholarships**.
- **Costume costs are not covered** by this scholarship and are still the responsibility of the performer and his or her family. Parents’ Auxiliary does grant limited Costume Scholarships, but they must be applied for separately through the Parents’ Auxiliary. Ask your show coordinator for an application, if you believe costume costs may be a financial burden to you or your family.

## Non-Work Scholarship (Full or Partial):

- Non-Work Scholarships are available **only to applicants with very limited financial resources or special circumstances**. CMT reserves the right at any time to request some form of verification of need.
- Non-Work Scholarships **cover all tuition costs and require no volunteer work** from the participant or a member of his or her family.
- A participant may request a Full Non-Work Scholarship or specify the amount they feel comfortable paying and request a Partial Non-Work Scholarship to cover the difference. Full Scholarships cover the entire cost of tuition. Partial Scholarships require the **balance of tuition costs be paid at the time of audition or enrollment**. No exceptions.



# CMT Scholarship Program Description... PAGE 2

## Non-Work Scholarship (Full or Partial) – continued...

- In lieu of volunteering, Non-Work Scholarship recipients are required to submit a **one-page typed letter (to CMT)** at the conclusion of the program, describing how they and/or their family were able to benefit from their participation with CMT. Reports may be used by the fund-raising or marketing departments to promote CMT's scholarship program or solicit donations to support the program. You may request to remain anonymous if materials from your report are quoted. **The report must be written by the participant**, not a parent or other family member. The report is due on the final day of the class or production, unless otherwise authorized by the Education Associate. If the report is not turned in by the due date, the recipient will be **ineligible for any future scholarships**.
- **Costume costs are not covered** by this scholarship and are still the responsibility of the performer and his or her family. Parents' Auxiliary does grant limited Costume Scholarships, but they must be applied for separately through the Parents' Auxiliary. Ask your show coordinator for an application, if you believe costume costs may be a financial burden to you or your family.

## Apply Today!

- If you are considering participating in any of our upcoming productions, we strongly encourage you to complete your scholarship application in advance. Don't wait until the deadline to apply. If you are planning to do a work scholarship, please note that you may begin working off your hours at any time. Don't wait - there are many areas to choose from. So apply today!

## How To Apply:

1. Complete the attached **Scholarship Application Form**,
2. Set up an appointment to submit your application with the Scholarship Program Manager listed below. Applicants who are under the age of 18 will require a parent/guardian to attend the interview as well.
  - For first time applicants – you will need to undergo an interview process upon submission of your application. Please **allow at least 1 hour**, when submitting your application.
  - For scholarship renewals – please **allow at least 15 minutes** to complete your renewal contract.
3. Your application will be reviewed upon submission and, if selected, you will be offered a **scholarship contract** to sign. Please keep a copy of this contract for your records.

**All scholarships must be submitted, in person, by 5:00pm on the posted deadline date.**

**Faxed applications will not be accepted.**

**Late applications will not be accepted.**

**No exceptions will be made – regardless of circumstance.**

*Thank you for your cooperation.*

To schedule an appointment, please contact Juliana Deleruyelle, CMT Education Associate, at 408-288-5437 ext. 312 or email [juliana@cmtsj.org](mailto:juliana@cmtsj.org).



# CMT Scholarship Application Form... PAGE 1

DATE \_\_\_\_\_

## PERFORMER INFORMATION

Performer Name: \_\_\_\_\_  
*Last* *First* *MI*

Address: \_\_\_\_\_  
*Street* *City* *State* *Zip*

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Ethnic Background: \_\_\_\_\_

Gender:  Male  Female Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_ District: \_\_\_\_\_

GPA: \_\_\_\_\_ School Activities: \_\_\_\_\_

Interests/Other Activities: \_\_\_\_\_

Performing Arts Experience (feel free to use the back of this form):  
\_\_\_\_\_

Current Employer (if 18 or older): \_\_\_\_\_

Means of support if not from parents or employment: \_\_\_\_\_

Type of Scholarship Requested:

- Work Scholarship (indicate tuition amount you could pay, if any \$ \_\_\_\_\_)
- Non-Work Scholarship (indicate tuition amount you could pay, if any \$ \_\_\_\_\_)

Have you received a scholarship in the past? \_\_\_\_\_ (If yes, indicate most recent?) \_\_\_\_\_

Application for (please check one below and indicate the **season**, **age group**, and **show or class title**):

- Audition Fee \_\_\_\_\_
- Training Fee \_\_\_\_\_

Why do you want to participate in the program listed above? (Use another sheet of paper if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



CHILDREN'S  
MUSICAL  
THEATER  
SAN JOSE

# CMT Scholarship Application Form... PAGE 2

DATE \_\_\_\_\_

If you are under the age of 18, please have a parent CONTINUE on this page.

If you are 18 or older, please SKIP to the next page and then continue.

## PARENT/GUARDIAN INFORMATION

Parent/Guardian Name 1: \_\_\_\_\_  
*Last* *First*

Relationship to Performer: \_\_\_\_\_

Are you the primary care giver for this child: Yes No

Address (if different): \_\_\_\_\_  
*Street* *City* *State* *Zip*

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Means of support if not employed: \_\_\_\_\_

Parent/Guardian Name 2: \_\_\_\_\_  
*Last* *First*

Relationship to Performer: \_\_\_\_\_

Are you the primary care giver for this child: Yes No

Address (if different): \_\_\_\_\_  
*Street* *City* *State* *Zip*

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Means of support if not employed: \_\_\_\_\_

Why do you want your child to participate in this program? (Use another sheet of paper if necessary.)

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CHILDREN'S  
MUSICAL  
THEATER  
SAN JOSE

# CMT Scholarship

DATE \_\_\_\_\_

## Application Form... PAGE 3

Please explain your current financial situation and why you feel you that you or your family needs to be considered for a scholarship at this time. (Use another sheet of paper if necessary.)

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If you are applying for a **Work Scholarship**, please indicate which tasks you or a family member could do. Feel free to attach resumes, if you have them, as you may have skills in other areas that are not listed below.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Set Shop                  | <input type="checkbox"/> Communication Skills          | <input type="checkbox"/> People Oriented           |
| <input type="checkbox"/> Costume Shop              | <input type="checkbox"/> Detail Oriented               | <input type="checkbox"/> Receptionist              |
| <input type="checkbox"/> Education Department      | <input type="checkbox"/> Microsoft Excel               | <input type="checkbox"/> Internet Research         |
| <input type="checkbox"/> Development Department    | <input type="checkbox"/> Microsoft Word                | <input type="checkbox"/> Scanning Photos/Materials |
| <input type="checkbox"/> Marketing Department      | <input type="checkbox"/> Database Entry                | <input type="checkbox"/> Painting                  |
| <input type="checkbox"/> Production Department     | <input type="checkbox"/> Copying                       | <input type="checkbox"/> Cataloging/Inventory      |
| <input type="checkbox"/> Human Resources/Financing | <input type="checkbox"/> Filing/Labeling/Alphabetizing | <input type="checkbox"/> Scenic Design             |
| <input type="checkbox"/> Administrative Office     | <input type="checkbox"/> Proofreading/Editing          | <input type="checkbox"/> Carpentry                 |
| <input type="checkbox"/> Front Of House            | <input type="checkbox"/> Mailings                      | <input type="checkbox"/> Sewing                    |
| <input type="checkbox"/> Other _____               |  |  |

If you are applying for a **Non-Work Scholarship**, what are the inhibitors (physical conditions, time, or otherwise) that prevent you or a representative of your family from participating in the Work Scholarship program?

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Your signature indicates your full commitment to the program and acknowledges your understanding of the nature of the commitment. **If you do not fulfill your commitment to CMT after receiving a scholarship, you will ineligible to receive any future scholarships.**

Performer Name *(Please Print)*

Performer Signature:

Date

Parent / Guardian Name *(Please Print)*

Parent / Guardian Signature

Date

**REQUIRED if performer is under 18**

**Scholarship applications must be delivered IN PERSON to:** Juliana Deleruyelle • CMT Education Associate  
1401 Parkmoor Avenue, Suite 100, San Jose, CA 95126 • Phone: 408-288-5437 ext. 312 • Email: juliana@cmts.org