



## 2019 Vincent Legacy Scholarship Application

***The application deadline is Friday, March 29, 2019***

The Vincent Legacy Scholarship was created for sixth, seventh and eighth grade ethnically-diverse youth exhibiting a strong interest and ability in the performing arts (acting, singing and/or dance) who also demonstrate financial need in obtaining additional training opportunities in these areas.

### **To qualify, each applicant must:**

- be an ethnically-diverse youth who is currently in sixth, seventh or eighth grade in metropolitan Kansas City or surrounding communities
- demonstrate financial need
- have the strong desire and motivation to further refine and improve their skills through professional training in acting, singing and/or dance
- maintain a grade point average of “B” (3.0) or higher
- attend school regularly with no unexcused absences
- demonstrate an interest in community service

### **Information to be submitted by the student applicant:**

On a separate piece of paper, and with adult assistance if needed, please write a request for consideration addressing the following:

- Why do you want to receive training in acting, singing and/or dance?
- What personal qualities make you a strong candidate to receive the Vincent Legacy Scholarship?
- Do you currently participate in community service? If yes, describe the community service that you perform, including any service that you provide at your school. If you do not currently participate in community service, given the opportunity to do so, what areas of service interest you (i.e., health care, arts, the elderly, childcare, etc.)?

### **Information to be submitted in support of the applicant:**

- Completed application
- Letter of recommendation from the applicant’s current performing arts instructor/coach (If there is no current instructor/coach, a letter from the applicant’s classroom teacher is acceptable.)
- Letter of recommendation from at least one parent or guardian that addresses the applicant’s particular talents, skills and reasons why the applicant should be selected to receive the Vincent Legacy Scholarship
- Official record (copies acceptable) of current-year grades and attendance from the applicant’s school (for this full school year only)

### **Return completed application and support materials via one of the following channels:**

Mail to: Starlight Theatre  
Education and Outreach Department  
Attn: Vincent Legacy Scholarship Fund  
4600 Starlight Road  
Kansas City, MO 64132

Fax to: 816-361-6398

Email to: [education@kcstarlight.com](mailto:education@kcstarlight.com)

To continue in the process, applicants who submit completed materials must be invited to audition. For those selected, auditions will take place at Starlight Theatre beginning at 1:00 p.m. on Saturday, May 4, 2019. Audition requirements will be provided when the applicant is notified that he/she has been invited to audition. **No other audition date will be made available.** Additionally, a non-mandatory audition preparation workshop will be offered at Starlight Theatre on Sunday, April 14, 2019 from 1:00 p.m. to 4:00 p.m. for those auditioning.

In the event that the applicant is asked to continue:

Is the applicant available for the non-mandatory audition preparation workshop on April 14, 2019? \_\_\_\_ Yes \_\_\_\_ No

Is the applicant available to audition on May 4, 2019? \_\_\_\_ Yes \_\_\_\_ No

**I. Applicant Information:**

Applicant's full name: \_\_\_\_\_

Parent/Guardian #1 full name: \_\_\_\_\_

Parent/Guardian #2 full name: \_\_\_\_\_

Parent/Guardian #1 cell: \_\_\_\_\_ Parent/Guardian #2 cell: \_\_\_\_\_

Alternate phone number: \_\_\_\_\_  Home  Work  Other

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Parent/Guardian #1 email: \_\_\_\_\_ Parent/Guardian #2 email: \_\_\_\_\_

Applicant's current grade level: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_\_\_

Name of current school: \_\_\_\_\_

Anticipated year of graduation from high school: \_\_\_\_\_

Name of recommending performing arts instructor/coach or classroom teacher: \_\_\_\_\_

Phone number of recommending party: \_\_\_\_\_ Email: \_\_\_\_\_

**NOTE: The training information requested below is used to help program affiliates understand each applicant's background. Previous training is *not* required to qualify.**

**II. Training Information:**

List the applicant's acting training and/or performance experience (acting classes, school plays, etc.).

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List the applicant's singing training and/or performance experience (private voice lessons, school musicals, etc.).

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List the applicant's dance training and/or performance experience (studio classes, recitals, etc.).

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List any other special or unique skills the applicant would like to share (juggling, painting, solving puzzles, playing musical instruments, etc.).

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**NOTE: Demonstration of financial need on the part of each applicant's parent/s/guardian/s is a qualification requirement. For applicants in foster care, the income information of the foster parent/s should be provided. A copy of the affiliated 2018 federal tax return/s may be requested.**

**III. Income Information from 2018:**

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|--|----------|
| 1. Annual (full year's) income of Parent/Guardian #1 (wages, salaries, tips) | \$ _____ |
| 2. Annual (full year's) income of Parent/Guardian #2 (wages, salaries, tips) | \$ _____ |
| 3. Other taxable income (specify: pensions, capital gains, etc.): _____      | \$ _____ |
| 4. Annual (full year's) alimony or child support                             | \$ _____ |
| 5. Annual (full year's) Social Security benefits                             | \$ _____ |
| 6. Other non-taxable income (specify source): _____                          | \$ _____ |
| <b>Total Income (Add lines 1-6.):</b> \$ _____                               |          |

**IV. Additional Financial Information:**

Rent or mortgage payment per month: \$ \_\_\_\_\_

Total of household bills (gas, electric, water, etc.) per month: \$ \_\_\_\_\_

Total number of dependent children in the household (including the applicant): \_\_\_\_\_

Name/s and age/s of child/ren (including the applicant): \_\_\_\_\_

Does the applicant qualify for free or reduced lunch at his/her school? \_\_\_\_ Yes \_\_\_\_ No

Does the applicant/family receive financial assistance from any outside source? If yes, please explain:

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Is there anything else to consider regarding the applicant's/family's financial situation?

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For the purpose of this scholarship, “ethnically-diverse” is defined as:

African American/Black  
Asian-Indian American  
Asian-Pacific American  
Hispanic American/Latino  
Native American/Alaska Native  
Native Hawaiian/Other Pacific Islander

Does the applicant fit at least one component of the definition as listed above? \_\_\_\_ Yes \_\_\_\_ No

The Vincent Legacy Scholarship is not solely considered a financial award. Each winner joins a group of talented former winners and adult mentors whose mission is to guide and encourage the scholars as they advance in their performing arts training while maturing into adulthood.

As part of this selected group, scholars are expected to contribute to this mentoring process by:

- participating in social gatherings with other Vincent Legacy Scholarship winners and adult mentors at least once a year (during the winter holiday) and, for the current and previous year’s winners, during the summer on the Vincent Legacy Scholarship winner announcement night on the Starlight Theatre stage
- making themselves available for public relations appearances and performances on behalf of the program
- remaining in frequent contact with the adult mentors involved with the program, including responding to phone calls and e-mails in a timely manner
- providing yearly progress information regarding their performing arts training as well as personal growth

“I certify that the facts contained herein are true and complete to the best of my knowledge and understand that, if granted the scholarship, falsified statements on this application shall be grounds for removal of scholarship monies. I have also read and understand that as a winner of the scholarship I will become part of a mentoring program and agree to the above outlined requirements of that program.”

Date: \_\_\_\_\_

Applicant signature: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

***The application deadline is Friday, March 29, 2019***

**NOTE: Applicants will be notified when application materials have been received and will be advised if materials are missing. If missing materials are not submitted by the above deadline, the application will not be considered and no further contact will be made.**

**Questions? Email [education@kstarlight.com](mailto:education@kstarlight.com) or call 816-997-1134.**