



March 15th  
Submission Deadline

## CELEBRITY CONCERT SERIES GUILD, SCHOLARSHIP APPLICATION

**BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE FOLLOWING:**

- You must plan to be a full-time undergraduate student at DSC.
- 2.5 or higher cumulative GPA required ( High School or current DSC Grades)
- Audition and participation in Celebrity Concert Series Guild program required.

**PERSONAL INFORMATION**

Social Security Number: \_\_\_\_\_ Dixie State College Student ID # \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email address: \_\_\_\_\_

Current Contact Mailing Address: \_\_\_\_\_

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

Home Phone Number: \_\_\_\_\_ Alternate/Cell Phone Number: \_\_\_\_\_

High School: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_ GPA: \_\_\_\_\_ ACT: \_\_\_\_\_

Year in College: Freshman: \_\_\_\_ sophomore: \_\_\_\_ Junior: \_\_\_\_ Senior: \_\_\_\_ Cumulative GPA: \_\_\_\_\_

Declared Major: \_\_\_\_\_ Bachelors Program: \_\_\_\_ Associate Degree: \_\_\_\_ Certificate: \_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Talent or musical instrument you plan to present at Audition** \_\_\_\_\_  
(You must provide your own accompaniment)

**Briefly explain your qualifications for the Celebrity Concert Series Guild Scholarship:**

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**List musical/theatrical honors or awards you have received:**

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**List musical/theatrical activities in high school and/or college:**

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**List clubs, sports, honors, offices, or activities you have been involved in during high school or college:**

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**Comment briefly on your educational and vocational plans and goal. Tell us something that you would like us to know about you that would be helpful in assessing your eligibility for this scholarship:**

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(attach additional paper as needed)

**List three personal references (people who know you well in your specific area of talent):**

Full Name	Phone Number	Relationship to you
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I understand that by completing this application, I will be considered for Scholarships at DSC and that I am not guaranteed a scholarship.

I have read the instructions and certify that the above information provided in this application is true and correct to the best of my knowledge. I also declare that if I attend Dixie State College, I will abide by the academic, scholastic and social standards of the college. A student found guilty of non-disclosure or misrepresentation in completing this form will be subject to disciplinary action, loss of scholarship and/or dismissal from college.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Application Completion Checklist:**

- Make sure your completed application is neat, legible and written or typed in black ink.
- Submitted on or before March 15th deadline (if mailed, must be postmarked by March 15th)
- The scholarship office will contact you for the time and location of auditions.

**Submit your completed application to:**

Susan Perschon  
DSC Scholarship Coordinator  
225 South 700 East  
St George, UT 84770

**FERPA (Family Educational Right and Privacy Act)** requires that students give written permission to have other individuals such as parents, spouse, etc. access their Dixie State College information. Please complete an **Information Release Form** at <http://www.dixie.edu/reg/info-release.doc> if you wish to allow information to be discussed by a third party. Please submit the completed form to the Registrars Office.