

College of Fine Arts UTLA Scholarship

The College of Fine Arts will offer three annual scholarships of up to \$5,000 for undergraduate students to participate in the UTLA Program during the Fall 2008, Spring 2009, or Summer 2009 semester.

Application Deadline: Rolling

Scholarships for the entire year are reviewed on a rolling basis; therefore it is highly recommended you submit your application as soon as possible. Once all funds have been awarded, no additional scholarship money will be available.

Financial Aid:

If this award is used to support travel (including transportation, program fees, lodging, and/or meals) it will not impact your financial aid award. If you have further questions, please contact the Office of Student Financial Services.

Eligibility:

- Students must be undergraduates in a degree-seeking program in the College of Fine Arts.
- Students must have a minimum 2.5 GPA.
- Students must attend a UTLA Information session (see <http://utla.utexas.edu/info/index.htm> for upcoming information session dates and times) OR watch the UTLA informational video available online at <http://utla.utexas.edu/index.htm> and set up an appointment with FACS to discuss the program.
- Students must complete all application materials as outlined below.

SUBMISSION REQUIREMENTS

To apply for a scholarship, submit the following application package:

1. Completed application form
2. On a separate sheet(s) of paper, provide the following information:
 - a. A detailed budget for participating in the UTLA Program (including program fees, travel, room and board, etc) and the amount of money you are requesting.
 - b. A statement addressing how your participation in the UTLA program will enhance your educational and career goals.
3. Current resume
4. Two recommendations using the attached form including one from a faculty member in your major (art, art history, music, theatre, or dance) department.

Submissions may be turned in to Career Services at the main reception desk of the Fine Arts Dean's Office in DFA 2.4. Please email Ann McNair at apermann@austin.utexas.edu if you have any questions.

2008-2009 College of Fine Arts UTLA Scholarship Application Form

APPLICANT INFORMATION

Name: _____

UTEID: _____

Address: _____

City, State & Zip Code: _____

Phone: _____

E-mail: _____

Degree & Major: _____

Planned semester and year of participation in the UTLA program: _____

Overall GPA: _____

Other scholarships you will receive during planned semester in LA:

Name of Scholarship	Length (Semester, year, multi-year)	Amount

If you have unusual financial circumstances you want considered, please explain them here (example dependent expenses, family circumstances):

Amount Requested (up to \$5,000): _____

INFORMATION RELEASE AUTHORIZATION

I certify that all information in this application is complete and accurate and that receiving the scholarship funds is contingent on my acceptance into and participation in the UTLA Program. If I am selected to receive a UTLA Scholarship, I authorize the College of Fine Arts to publish my name, major, graduation date and award information.

Signature

Date

Remember to include all application materials along with the application form.

College of Fine Arts UTLA Scholarship Recommendation Form

To be completed by student:

Name: _____

UTEID: _____

Choose one:

____ I voluntarily waive access to this confidential recommendation form.

____ I retain my right of access to the confidential recommendation form.

Signature: _____ Date: _____

To be completed by the reference:

How long and in what capacity have you known the applicant?

I would compare the applicant with other students of the same level as follows:

	Excellent	Above Average	Average	Below Average	Poor	Not able to assess
Intellectual Capability						
Motivated for a Career in the Entertainment Industry						
Creativity						
Ability to follow through						

Please describe how the applicant demonstrates a commitment to excellence and potential for success in the UTLA Program and a career in the entertainment industry. Attach an additional sheet if needed.

Signature: _____ Date: _____

Printed Name: _____

Title: _____

Phone Number: _____

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Name: _____

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Choose one:

____ I voluntarily waive access to this confidential recommendation form.

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