



The Dr. Christopher Roselli Scholarship Application

Please complete the following application and return along with all supplementary materials via postal mail to The Lee Strasberg Theatre and Film Institute in New York at 115 East 15th Street, New York, NY 10003.

Student Information

Last Name: First Name:

Date of Birth (mm/dd/yyyy): Age:

Gender:

Contact information

Home phone: Cell phone:

E-mail Address:

Street Address:

City: State: Zip:

Level of Education

- High School
- College/University
- Graduate Studies

Name of Academic Institute:

Other:

Background

Awards, Honors and Scholarships and/or volunteer work.

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Artistic Review

How did you hear about this scholarship?

Why do you want to study at The Lee Strasberg Theatre and Film Institute (min. 700 words typed only)

How will receiving this scholarship impact your professional and artistic life? (min. 700 words typed only).

APPLICATION REQUIREMENTS: Along with this application you must include the following items. Your application will not be complete until all these items are received exactly as described.

1. Two letters of recommendation (no more than 6 months old) from a professional or teacher who can speak about your work. Letters must be signed and dated.
2. Copy of your latest academic transcript.
3. One passport-sized photo for identification purposes only
4. Resume/headshot (optional)
5. Copy of valid picture ID -Driver's license, passport, state ID card
6. Send a DVD or flashdrive you will not need returned of a video of you singing one song with an accompanist or acapella. You can also e-mail your video or link to your video to Emily@Strasberg.com

I certify that to the best of my knowledge that the foregoing information I have provided on this application is accurate and correct.

Signature: Date: