



**OWATONNA ARTS CENTER
High School Scholarship Application**

Application Deadline: March 31

435 Garden View Lane

P.O. Box 134

Owatonna, MN 55060

Phone: 507.451.0533

Fax: 507.446.0198

www.oacarts.org

To qualify the applicant must have graduated from a high school in Steele County, or must be a current resident of Steele County for one year.

Student's Full Name _____

Home Address _____

Home Telephone _____

Cell Telephone _____

E Mail _____

Both Parents or
guardians' Names _____
Address _____

Telephone number _____

Cell Telephone _____

Artistic Media for further study (select one or two)

Visual Arts Drama Communication Dance Literature Music

High School information

Name and address of High School you are currently attending:

High School Graduation Date _____

Name and Address of Post Secondary Institution to which you have been accepted:

All applications must include the following:

1. High School transcript

2. Portfolio or performance per one of the following:

Visual Art Portfolio must include 5 original works labeled: title, media, and size Communication, dance,

music, theater must show solo performance no longer then 5 minutes. A CD or digital format is preferred.

Literature: Must include three original compositions

3. Artist Statement

4. Recommendations

List all school activities in which you have participated during the past four years (e.g.. student government,

music sports, etc.) List all community activities in which you have participated without pay for the past four years

(e.g. Boy/Girl Scouts, hospital volunteer, special Olympics, etc.)

Activity Number of Years Special awards/honors Offices held

Work experience:

Company Position Length of employment

High School Scholarship Recommendation Form

Applicant please give one from to an educator and one to a non relative who can document your leadership, personality, reliability and creative skills.

Applicants Name: _____

How do you know this person _____

How long have you known this person _____

(Ranking is as following: 10 excellent, 5 average, 1 needs improvement)

The applicant's achievements reflect their ability 1 2 3 4 5 6 7 8 9 10

The applicant's commitment to school and community 1 2 3 4 5 6 7 8 9 10

The applicant's ability to set realistic & attainable goals is 1 2 3 4 5 6 7 8 9 10

The applicant demonstrates curiosity and initiative 1 2 3 4 5 6 7 8 9 10

The applicant is able to seek, find & use learning sources 1 2 3 4 5 6 7 8 9 10

The applicant demonstrates good problem solving skills follows 1 2 3 4 5 6 7 8 9 10

Rate the applicant's creativity 1 2 3 4 5 6 7 8 9 10

Additional comments:

Appraiser's Name _____

Title _____ Telephone number _____

Appraiser's Signature: _____

Date _____

Artists Statement:

Applicant must submit an artist statement. (The statement can be no longer than two pages)

In your artists statements respond to the following sentence:

Describe your art form, why it is an important part of who you are, and what do you want it to say to people?

Please send the completed form to: OAC • P.O. Box 134 • Owatonna, MN 55060

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