

TNS Professional Development Scholarship Application Form



Applicant Details

Applicant Name:	
Address:	
Phone Number:	
Email:	

Additional Documents

Please submit the required documents according to the instructions in the Application Guidelines.

Send to Theatre Nova Scotia offices by mail, or by email at <theatrens@theatrens.ca>

Signature

I certify that the information I have provided and contained in this application is correct to the best of my knowledge:

Print Name: _____

Date: _____

Signature: _____