

Application for SECA Bill Hamilton Memorial Scholarship Fund

Name: _____ Clown: _____
Address: _____ City: _____ State _____
Email: _____ Zip: _____
Phone: (_____) _____ Age: _____ Sex: Male / Female (Circle One)
How long have you been clowning? _____ Clown Type: _____
Marital Status: Single/Married/Divorced/Widowed # people attending convention with you: _____

You MUST include three (3) letters of reference with this application

(You may answer these questions on a separate piece of paper.)

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1. In 50 words or LESS, tell why you want this scholarship and why you feel you deserve it.
2. How do you plan to use the knowledge gained to further your clowning skills; and how do you plan to share it?
3. List any workshops, conventions, or other clown activities in which you have participated.
4. Have you ever received a SECA Memorial Scholarship or any other scholarship? If so, which one and when?
5. Would you be able to attend this convention if you do not receive a scholarship?

Applicant's Signature _____ Date _____

Please include a color photo of yourself in costume. Photos will not be returned.

Return completed application, three letters of reference, and photo to:

Bob Gretton
PO Box 787
Waldorf, MD 20604
Phone: (301) 843-8212 Email: bunkytclown@comcast.net

Applications **MUST** be postmarked on or before August 1, 2012.

Applicant **MUST** be a 2012 SECA member.

Applicant **MUST** be a SECA member for at least one year to be eligible.

*SECA Board Members and convention host alley members are not eligible to participate.
If you are 17 years old or younger, you must be accompanied by an adult.*

This scholarship is limited to only the 2012 SECA Convention.