SCHOLARSHIP APPLICATION - AFF SUMMER FILM CAMP

A limited number of tuition scholarships are available for students interested in attending the Summer Film Camp. Please use dark pen. Please print legibly. Incomplete applications will not be processed. Please note that this application is TWO PAGES.

Applications must be submitted by April 29, 2018 to be considered.

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STUDENT INFORMATION	
Name:	Age:
Current School Name:	
Indicate your 1st and 2nd choice workshop:	
□ Script to Screen: June 4 – June 15 □ Filmmaking 101: June 12 – June 15 □ Claymation Creations: June 11 – June 15 □ Combo Camp (Full Day): June 11 – June 15 □ Filmmaking 101: June 18 – June 22 □ Claymation Creations: June 18 – June 22 □ Combo Camp (Full Day): June 18 – June 22 □ Script- to-Screen: June 18 – June 29 □ Filmmaking 101: June 25 – June 29 □ Claymation Creations: June 25 – June 29 □ Combo Camp (Full Day): June 25 – June 29 □ Full Day Filmmaking 101: July 2, 3, 5, 6 ETHNICITY This information is used solely for statistical purposes in	□ Filmmaking 101: July 9 – July 13 □ Claymation Creations: July 9 – July 13 □ Combo Camp (Full Day): July 9 – July 13 □ Write, Shoot, Direct!*:July 9 – July 13 □ Filmmaking 101: July 16 – July 20 □ Claymation Creations: July 16 – July 20 □ Combo Camp (Full Day): July 16 – July 20 □ Script to Screen: July 16 – July 20 □ Filmmaking 101: July 23 – July 27 □ Claymation Creations: July 23 – July 27 □ Combo Camp (Full Day): July 23 – July 27 □ Script to Screen: July 23 – July 27
help underwrite the Summer Film Camp.	
African American	European American
Native American	Bi/Multi-Racial
Asian/Pacific American	Other Specified Ethnic Group
Latino/Hispanic/Chicano American	
QUESTIONS	
Attach a separate sheet, if necessary, but responses to a	all five of the below should not exceed one page:
Honors, Scholarships and Awards:	
Film Education/ Prior Film Experience:	
Other camps previously attended (film or non-fi	ilm):

4)	Other extracurricular interests:			
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5)	5) Why do you want to attend AFF Summer Film Camp:			
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	T/GUARDIAN INFORMATION			
Parent/G	Guardian Name:			
What is y	your relationship to the student?			
Address	:	City, State:	Zip Code:	
Mobile F	Phone:			
Email: _				

STUDENTS, the following must also accompany this application:

- A personal essay (not to exceed one 8.5 x 11 page, double-spaced) explaining the following:
 - o How receipt of this scholarship will help you meet personal and/or educational goals.
 - o What you hope to learn at the Summer Film Camp.
 - o How attending camp will benefit you.
 - o Anything else you would like us to know related to attending this camp.
- A letter from your parent(s)/legal guardian(s) explaining his/her/their financial situation and need for this scholarship.
- One letter of recommendation from a non-family member (include contact information for reference).
- An official transcript or report card from your current school.

Deadline for consideration: April 29, 2018
**Incomplete applications will NOT be processed. **

SUBMITTING YOUR COMPLETE APPLICATION

Mail or fax COMPLETED applications to:

Austin Film Festival - Summer Film Camp 1801 Salina Street Austin, TX 78702

Fax: 512-478-6205

FOR MORE INFORMATION: Phone: 512.478.4795 | Email: vfpcoordinator@austinfilmfestival.com