

## ***Doug Ingalls Memorial Scholarship Program***

### **Purpose:**

To recognize the talents of college-bound high school seniors and reward their excellence in the areas of performance and scenic design.

The METG will award a designated number of scholarships to eligible high school seniors based on talent demonstrated in an acting audition. Since its inception in 1992, the METG has awarded \$77,900 to 129 college-bound students.

### **Eligibility:**

The applicant's high school must be a member of the Massachusetts Educational Theater Guild during the academic year of his or her application to the Scholarship Program.

Each recipient must matriculate as a full-time student in an institution of higher learning by September of the calendar year in which the scholarship is awarded. In the event a recipient fails to enroll by September, the award will be forfeited. METG, Inc. must receive official proof of matriculation (copy of tuition bill) before the award is issued.

Financial need is not a factor in determining scholarship recipients. A recipient may use the scholarship for any area of academic pursuit.

METG, Inc. reserves the right not to award the full number of available scholarships. Results of the judges' decisions will be posted on the METG web site, and winners will be notified in writing. Winners will be recognized during the Awards Ceremony at the culmination of The Massachusetts State Drama Festival State Finals.

### **Application Process and Fee:**

Students must complete and submit a "Scholarship Application Form" signed by a sponsoring teacher.

**There is a \$10.00 non-refundable fee per application.**

### **Application Deadlines:**

The "Scholarship Application Form," signed by both the applicant and the sponsoring teacher, must be postmarked by the appropriate application deadline and sent to the address listed on the form. Applications postmarked after that date will not be accepted. **The application deadline for Acting is November 1, 2016.**

### **Scholarship Competition Dates and Locations:**

The **Doug Ingalls Acting Scholarship** competition will be held on Saturday, December 3, 2016 at **St. John's Prep School in Danvers, MA**. In the event of a snow emergency, the competition will be held on Sunday, December 4.

### **Audition Process:**

The emphasis during the auditions is on presentation and performance. Each applicant must perform two contrasting pieces, not to exceed a total time limit of four minutes. The timer will stop the clock between monologues and will call time if the four-minute limit for the two selections is exceeded. Auditions must be solo presentations.

Before each audition, the applicant will be allowed to set the stage; one straight-backed chair and one small table will be provided. No additional set pieces or sound will be permitted. Costumes and props are not permitted. Applicants should

wear simple clothing that allows for ease of movement. No special lighting will be available. Judges may interview finalists; however, due to time constraints, judges will not give oral or written critiques.

## ***Doug Ingalls Scholarship Application Form***

**TYPE OR PRINT — CLEARLY AND BOLDLY. USE BLACK INK ONLY. SPONSORING TEACHER'S SIGNATURE AND THE \$10 NON-REFUNDABLE FEE MUST ACCOMPANY EACH APPLICATION. DO NOT ATTACH ADDITIONAL SHEETS. APPLICATIONS ACCEPTED FROM MEMBER SCHOOLS ONLY.**

**ACTING DEADLINE: NOVEMBER 1, 2016**

Applicant's Name: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: (        ) \_\_\_\_\_

High School: \_\_\_\_\_ Phone Number: (        ) \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address \_\_\_\_\_

***(Print clearly. WE'LL NEED TO CONTACT YOU! Use capitals and distinguish clearly between letters and numbers.)***

Applicant's Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Is your school a 2016–17 member of METG? \_\_\_\_\_

Name of Sponsoring Teacher \_\_\_\_\_

If applicable, what was the title of your school's last Festival production? \_\_\_\_\_

If applicable, list below the Festival productions in which you have participated:

Year	Production	Role/Position
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
*Applicant's Signature                      Date                      Sponsoring Teacher's Signature                      Date*

***Mail completed form and \$10 non-refundable fee per application to:***

***NEW ADDRESS!!!***

***MASSACHUSETTS EDUCATIONAL THEATER GUILD,***

***P.O. BOX 2538,***

***MASHPEE, MA 02649***

***Make checks payable to METG, Inc***