

## Anne Pritchard Fine Arts Scholarship Application 2026

Last Name	First Name	M.I
Address		Zip
Phone ()	Cell Phone ()	
Birth Date/ E-	mail	
High School Attending		
Parent(s)/Guardian	t)	
If you have applied for or received studies for the 2026-2027 school		to help further your
Name	Type	Amount 
	_	<u> </u>
		<b>\$</b>
Please indicate if any of these gra	ants/awards are for one or mo	re years.

List any formal training or specialized cla in the Fine Arts.	sses you completed in your area	a of interest(s)
Training/Class	School/Facility Name	Dates Attended
	· · · · · · · · · · · · · · · · · · ·	
Special recognitions received in high sch	ool:	
		d
	Year received	d
		d
	Year received	d
	Year received	d

List any volunteer activities. Include the year completed.

List any work experience:	
How did you discover the Anne Pritchard Fine	Arts Scholarship opportunity?
Check all that apply:	
☐ School Counselor	
	☐ Livonia Arts Commission Facebook Page
☐ School Teacher	
☐ School Web Site	☐ City of Livonia Facebook Page
☐ School Facebook Page	☐ City of Livonia Web Site
☐ Friend or Family Member	☐ Livonia Arts Commissioner
☐ Other (please specify)	

Applicant signature: Date:	
evaluate your application.	
In the following space, please write a statement about your career plans, aspirations, etc. In addition, please provide any background data which will help the committee evaluate your application.	