***Palette of Roses Art League Scholarship 2023***

The Palette of Roses Art League (PORAL) announces the 2023 **Palette of Roses Art League Scholarship Awards Program*.*** Under the Program, two students will be awarded a $1000.00 Art Scholarship.

***Program Guidelines & Priorities:***

* Applicants must plan to attend a two (2)-year community college or four (4)-year college or university in the Smith County Area. Current UT Tyler and TJC art students are invited to apply.
* Scholarship funds will be paid during the month of **October- 2023** **to the** student.
* Scholarship will be awarded during the Palette of Roses Artist reception and awards dinner.
* Applications open May 1, 2023.
* Applications must be received by the PORAL by September 15, 2023. The application can be mailed or emailed.

***Applicant Requirements:***

* Completed application with signoff by your Guidance Counselor
* One page essay expressing – Why You Create Art
* Three images of your artwork. (*hardcopy if mailed; pdf or jpg file format if emailed*)
* The East Texas College/University you plan to attend

If you have any questions, please submit them to: [paletteofroses@gmail.com](mailto:paletteofroses@gmail.com)

If mailed, please send completed application, essay, and artwork to:

P.O. Box 131633

Tyler, Texas75713

If sent electronically, please send completed application, essay, and artwork files to:

[paletteofroses@gmail.com](mailto:paletteofroses@gmail.com)

The applications will be reviewed and recipients selected by the Palette of Roses Art League Scholarship Committee. The scholarships will be awarded **October 18,2023** during the Texas Rose Festival awards ceremony. The two recipients will be notified prior to the awards ceremony so they may plan to attend.

***2023 Scholarship Application***

|  |  |
| --- | --- |
| Please **type** your answers. *Use an additional piece of paper if necessary* | |
| Last Name: | First Name, Middle Initial: |
|  |  |
| Mailing Address | |
| Street: | |
| City: State: Zip: | |
| Daytime telephone number: | Email address: |
| Date of Birth: Month Day Year | |
| List art classes, clubs and/or activities you participate in: | |
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|
| Name and location of high school or college: | |
| If you have decided on the college you will attend, please list the school name:    If not, list your top three (3) college choices: | |
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|
| Anticipated field of study: | |
| Name & address of parent(s) or legal guardian(s): | |
| *(Include address if different than your own listed in Question 2.)* | |
| Name(s): | |
| Street: | |
| City: State: Zip: | |
| Home phone of parents or legal guardians: Work phone: | |
| On a separate paper, please write an essay (250 - 500 words) on "Why you create art" | |

### STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent, that if chosen as a scholarship winner, my picture may be taken and used to promote the Palette of Roses Art League Scholarship Program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to PORAL, I will try to be present on October 18,2023,awards ceremony and/or reception to receive my scholarship award.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

**Signature of scholarship applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_**

**STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR**

I hereby affirm that this application meets the criteria set forth by this scholarship program and support submission of this application to the Palette of Roses Art League Scholarship Program.

Name of Guidance Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School or College:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact information (email and phone):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Guidance Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_**

Checklist:

\_\_\_ Application

\_\_\_ Essay on separate sheet of paper

\_\_\_ Guidance Counselor signature

\_\_\_ 3 Images of Artwork

**MAIL COMPLETED APPLICATION PACKAGE TO THE Palette of Roses Art League**

**PORAL**

**P.O. Box 131633**

**Tyler, Texas**

**75713**

**Email: paletteofroses@gmail.com**

**REMINDER:**

**Applications must be received by the Palette of Roses Art League by September 15, 2023**

**There will be no exceptions!**