



The Tom MacFarlane Memorial Scholarship

www.e-m-p.ca

Application Form

Name: _____

Address: _____

Phone: _____ **Email:** _____

Secondary School: _____

Address: _____

References:

1. High School Teacher Reference

(teacher who has completed a letter of reference for this application)

• **Name:** _____

• **Position:** _____

• **Email:** _____

2. Performing Arts Reference

(Instructor, mentor, director, producer – no family or friends)

• **Name:** _____

• **Relationship to Applicant:** _____

• **Email:** _____

Application Criteria:

☐ Completed Application Form

- **Essay (350-500 words)**
 - Introduce yourself
 - Defend your merit for this award, i.e. grades, awards achieved in this area
 - Detail your experiences and activities in the performing arts
 - Explain how the prize money will be used to improve your skills in this area
 - **Reference Letter** from a high school teacher, addressed to the Board, providing evidence of why you deserve this award
 - **Video** – 2-4-minute recent video (within the last 3 months) showcasing your performing art OR a Portfolio for the production application.
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CHECK

- ✓ I hereby certify that the information provided is accurate and true
- ✓ I understand that falsifying information will result in disqualification from the application process.
- ✓ I certify that I am a permanent resident of Etobicoke.
- ✓ I agree to be contacted by EMP regarding this award.
- ✓ I agree to be acknowledged in future publications by EMP and its affiliates should I receive this award.

✓ Signature: _____ Date: _____

Due Date: May 15, 2026

Send completed application package to: emproductions1966@gmail.com