



UHEAA Utah High School Film Festival Scholarship

Scholarship Application

THIS FORM MUST BE POSTMARKED BY APRIL 6, 2012! LATE APPLICANTS WILL BE DISQUALIFIED.

All information is required. Please write clearly in black or blue ink. Application is due by April 6, 2012.

First Name	Middle Initial	Last Name	
SSN and/or State Student Identifier (located on transcript)		Date of Birth	Phone Number ()
Street Address		City, State ZIP	
Mailing Address		City, State ZIP	
High School GPA	Current Grade Level	E-mail Address	
Students under age 18: Please have a parent or guardian fill out the information below and sign the application.			
First Name	Middle Initial	Last Name	
SSN		Phone Number ()	
Mailing Address (if different from above)		City, State ZIP	

Title of Visual Creation: _____

Description of Visual Creation: _____

Length of Time: _____ seconds



Agreement and Release

By signing and submitting this application and agreement, I understand that all material obtained will be used by Utah Higher Education Assistance Authority (UHEAA) for advertising, training, and related purposes, including external distribution via satellite broadcast, cable TV, radio broadcast, webcast or on-demand streaming in digital format on the Internet. UHEAA may also share this material with others, as appropriate.

I understand that my video or animation entry (the Entry) will become the property of UHEAA and I understand that use of the Entry may include, but not necessarily be limited to, the following:

- Internal use at UHEAA and other institutions in streaming digital.
- Format (live or on demand) on the Internet or other digital media.
- Distribution (may include videotape reproduction, satellite broadcast, cable TV, webcast, on-demand).

I understand that I am responsible for obtaining signed personal release agreements from every person who appears intentionally in the Entry and submitting those release agreements to UHEAA with this application.

If I am a parent or guardian applicant, I agree that any winnings will be officially awarded to me but placed in the Salt Lake Education Foundation trust in the name of the minor student listed on this application.

I understand that, should I win one of the scholarships, in order to collect the scholarship money, I (or, for parent/guardian applicants, the minor student named on this application) must:

1. Within four years of my (the student’s) graduating class’s completion of high school, enroll in a postsecondary institution eligible for Title IV aid.
2. Be a student in a Utah high school at the time the scholarship is won.
3. Notify the Salt Lake Education Foundation trust when I (the student) graduate from high school and provide them with proof of enrollment in an eligible postsecondary institution.

If I enter this scholarship competition with another student or students, I agree that the scholarship prize, should it be awarded to us, will be divided evenly amongst all entrants.

I have read and agree to be bound by this consent form.

Student Signature Date

Parent/Legal Guardian’s Signature (if student is a minor) Date

MAIL THIS COMPLETED FORM TO:

Sumiko Martinez, c/o UHEAA
60 South 400 West
Salt Lake City, UT 84101

If you have any questions regarding this application or scholarship contest, please contact us at:

UHEAA Outreach
Sumiko Martinez, 801-366-8477, smartinez@utahsbr.edu
Bryan Lee, 801-456-7385, blee@utahsbr.edu



**UHEAA Utah High School Film Festival Scholarship
Unlimited Personal Release Agreement**

THIS FORM MUST BE COMPLETED BY EVERY PERSON INTENTIONALLY FEATURED IN YOUR FILM.
INCLUDE ALL RELEASE FORMS WITH YOUR CONTEST SUBMISSION.
ENTRIES WITHOUT RELEASES MAY BE DISQUALIFIED.

Please print clearly in blue or black ink.

Grant

For consideration which I acknowledge, I irrevocably grant to Utah Higher Education Assistance Authority (UHEAA) and its assigns, licensees and successors the right to use my image and name in all forms and media including composite or modified representations for all purposes, not limited to: advertising, trade, or any commercial purpose throughout the world and in perpetuity. I waive the right to inspect or approve versions of my image used for publication or the written copy that may be used in connection with the images.

Release

I release UHEAA and its assigns, licensees and successors from any claims that may arise regarding the use of my image including any claims of defamation, invasion of privacy, or infringement of moral rights, rights of publicity or copyright. UHEAA is permitted, although not obligated, to include my name as a credit in connection with the image.

UHEAA is not obligated to utilize any of the rights granted in this Agreement.

I have read and understood this Agreement and agree to be bound by its terms. This Agreement expresses the complete understanding of the parties.

Printed Name: _____ Birth Date: _____

Signature: _____ Date: _____

Address: _____

Parent/Guardian Consent [required for persons under age 18]

I am the parent or guardian of the minor named above. I have the legal right to consent to the terms and conditions of this release, and hereby do so.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Address: _____