

## APPLICATION FORM

Please attach: 1 headshot (passport size photo)

Full length facing front

Full length facing back

Full length facing side

First names:

Surname:

Home Address:

Phone number:

Mother:

Father:

Email address:

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Nationality:

Country of residence:

Date of birth:

Age on September 1<sup>st</sup> 2021:

Height:

Full name of Parent/Guardian:

Job Occupation: Mother-

Father-

Name & address of current Dance School:

Teachers email address:

## Dance Examinations

(If none, please state how long you have studied that discipline)

	Grade	Exam board (e.g- RAD, ISTD...)	Result	Year
Ballet:				
Modern:				
Tap:				
Singing:				
Acting:				

**Health** (please select any that apply to you (this information is for monitoring purposes only and does not affect our audition process):

- |  |  |
|--|--|
| <input type="checkbox"/> No known disability                   | <input type="checkbox"/> Dyslexia / Dyspraxia                      |
| <input type="checkbox"/> Partially sighted or sight impediment | <input type="checkbox"/> Mobility issues                           |
| <input type="checkbox"/> Eating disorder e.g. anorexia/bulimia | <input type="checkbox"/> Unseen disabilities e.g. diabetes, asthma |
| <input type="checkbox"/> Learning disability                   | <input type="checkbox"/> Mental health issues                      |
| <input type="checkbox"/> Hearing impairment                    | <input type="checkbox"/> Any Disability not listed:                |
| <input type="checkbox"/> Medical condition                     |  |

Please list any injuries or serious illnesses

What are your career aims and objectives?