



27 Apollo Drive, Mairangi Bay, PO BOX 33 1264, Takapuna
Ph: 09 475 6186
www.apollotheatreschool.com

APPLICATION FORM – Diploma or Certificate Courses

2009

All applicants must complete the following form and ensure that all items listed on page 3 are attached.

PERSONAL DETAILS *(please print)*

Surname:	<input type="text"/>	First Name(s):	<input type="text"/>
Preferred name:	<input type="text"/>	Date of Birth:	<input type="text"/>
Nationality:	<input type="text"/>	Ethnicity:	<input type="text"/>
Eligibility to study in NZ:	NZ Citizen <input type="checkbox"/>	Australian Citizen <input type="checkbox"/>	NZ Resident <input type="checkbox"/>
	Other (please describe):	<input type="text"/>	

CONTACT DETAILS

Phone number:	<input type="text"/>	Mobile:	<input type="text"/>
Email:	<input type="text"/>		
Address:	<input type="text"/>		

EMERGENCY CONTACT

Name:	<input type="text"/>	Relationship:	<input type="text"/>
Contact ph:	<input type="text"/>	Mobile:	<input type="text"/>

MEDICAL

Known medical conditions:	<input type="text"/>		
History of bone, ligament or muscle injuries:	<input type="text"/>		
Physical impairments:	<input type="text"/>		
Doctor Name:	<input type="text"/>	Practice:	<input type="text"/>
Letter attached?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

COURSE INFORMATION *Which course would you like to audition for?*

Certificate	<input type="checkbox"/>	Diploma	<input type="checkbox"/>
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What are your aims in undertaking this course? (e.g. what would you like to do upon completion of the course?)

APPLICATION REQUIREMENTS

Please note the minimum requirements for entry into Apollo Theatre School are:

- At least 16 years of age (by course commencement)
- Holding at least NCEA Level 1 or equivalent (at course commencement)
- Allowed to live and study in NZ

If the applicant is successful at audition, a Letter of Offer from The Apollo Theatre School will be sent to the applicant inviting them to enrol in the school.

SUPPORTING DOCUMENTS

Please ensure the following items are included in the application and note that an applicant cannot audition until a complete application form is submitted.

1. \$200 (GST incl) *non-refundable application fee to cover audition, application and administration costs.
2. Completed Application Form
3. Copy of identification to prove either that the applicant is a NZ citizen or is able to study in NZ
4. 2 x passport photos (colour)
5. A full length photograph in which the applicant is: (1) standing; (2) facing the camera with feet in parallel and arms relaxed by sides; and (c) wearing form fitting practice gear.
6. Letter from applicant's Doctor clearing the applicant to undertake a full time dance programme.
7. Copy of NCEA certificate or equivalent. If applicant is currently studying and due to complete at the end of the year, this certificate will be required prior to the start of the school year.

* the application fee is a non-refundable charge for all applicants however upon gaining a place at the school and formally enrolling, the application fee becomes part of the course fees and the fee refund policies for students will apply.

TO APPLY

Please attach a \$200 cheque for the Application Fee to the application form. Please make the non transferable cheque payable to *The Apollo Theatre School Ltd*. Please send the completed application form with all the items on the above list to:

The Apollo Theatre School
PO Box 33-1264, Takapuna, Auckland

Upon receipt of a complete application, applicants will be sent a letter with full details of the audition and a receipt of payment. **Applications must be received by Monday 7th September 2009.**

APPLICATION FORM GUIDELINES

Please use the below information to guide you in completion of your application form:

Nationality:	Your country of citizenship (where were you born?)
Ethnicity:	The ethnic group you associate with e.g. NZ European, Maori, Pacific Island
Emergency Contact:	In the case of an emergency, who the school should contact
Known medical conditions:	e.g. asthma
History of injury:	e.g. tore ligament in 2001
Impairments:	e.g. hearing impaired
Doctor:	Who is your GP or family doctor
Practice:	What is the name of the medical centre or practice
Letter:	Do you have a letter from your Doctor clearing you for dance training?
Course information:	Which course would you like to enrol in?
Dance History:	Certificates or qualifications you have achieved. Organisation refers to the institution that issued the certificate (e.g. AJDA or RAD). If no formal certificates please describe your dance background or experience.
Dance Experience:	List your dance experience you wish the school to consider in your application (can include performances in shows or competitions etc)
Current activity:	Where you currently study dance and what you are studying
Academic achievements:	Your past and current situation with regard to school / education

