

 BTEC LEVEL 3 APPLICATION FORM

Please complete the form below and email to admissions@asatheatrearts.com along with a headshot photo attachment.

**Please indicate whether you will be submitting a video entry, or whether you would like to**

**attend a live in-person audition at our studios. Confirmation of your audition date and time**

**will be emailed to you within 7 days.**

**APPLICANT DETAILS:**

\*First Name(s) ………………………………………………………………………

\*Surname …………………………………………………………………………….

\*Address & Postcode ……………………………………………………………….

………………………………………………………………………………………….

\*Email Address ……………………………………………………………………….

\*Phone Number ………………………………………………………………………

\*Date of Birth ………………………………………………………………………….

\*Gender Identity ………………………………………………………………………

**WHICH COURSE ARE YOU APPLYING FOR? (Please tick)**

 Dance BTEC Level 3

 Musical Theatre BTEC Level 3

**WOULD YOU PREFER? (Please tick)**

 Video Submission Audition

 Live In-Person Audition

**PARENT/GUARDIAN DETAILS:**

\*Parent/Guardian Full Name ………………………………………………………

\*Parent/Guardian Phone Number …………………………………………………

\*Parent/Guardian Email …………………………………………………………….

\*Parent/Guardian Address & Postcode(if different to above) …………………..

………………………………………………………………………………………….

\*Full name and address of most recent school/college ………………………….

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1. Please list all examinations passed or to be taken (GCSE, AS, A-Level etc) *(continue on a separate page if necessary)*:

2. Please tell us in full about your performing experience *(continue on a separate page if necessary)*:

3. Please tell us why you wish to study at ASA Theatre Arts *(continue on a separate page if necessary)*:

4. Please detail any SEN requirements for us to assist you at your audition *(continue on a separate page if necessary)*:

\*Please email a headshot (there is no requirement for this to be professional) to admissions@asatheatrearts.com along with this form.

\*Signature of Parent ………………………………………. Date: ………………………………….