

UNC-Charlotte/NCDT Audition Form

Professional Training Certificate in Dance

General info

Student's Name: _____

Birth Date: _____ Soc. Sec. # _____

Height: _____ Weight: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

What will be your major at the University? _____

Have you applied to UNC Charlotte? _____

Have you been accepted at UNC Charlotte? _____

Training

Current Dance Studio: _____

Studio Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Current Ballet Teacher: _____

Total years of Ballet training: _____

Number of Years on Pointe: _____

Number of Ballet classes per week: _____

List other styles of dance training: _____

List Summer Programs Attended and the Year:

Audition info

Audition # _____

I am auditioning in this city: _____

I have enclosed a Videotape for my audition
Along with the \$25.00 audition fee & this form

Payment info

Yes, I have enclosed my \$25.00 non-refundable audition fee along with this application. (Checks made payable to NCDT)

**For Information Call:
704-372-0101 ext. 2770**

Email: SchoolofNCDT@ncdance.org
Website: www.ncdance.org

If enclosing a videotape, please mail to:

**North Carolina Dance Theatre
701 N. Tryon Street
Charlotte, NC 28202
Attn: Allison Paksoy**

Notes
