



Internship Program Application

Last Name: _____ First Name: _____

Date of Birth: ____/____/____ Phone: (____) ____ - _____

E-Mail Address: _____

Current Address: _____ Valid until: _____

City: _____ State: _____ Zip: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Current College/University: _____

Degree: _____ Major: _____ Expected Graduation Date: _____

Which of the following Departments are you applying for?

- Scenic - Props - Costumes - Sound - Lighting - Stage Management - Production Management - Company Management - Artistic Management - Communications

1st Choice: _____ 2nd Choice: _____

Internship Session (Circle one)

Table with 3 columns: Session (Fall, Spring, Summer), Dates (Oct-Jan, Feb-May, June-Sept), and Application Deadline (June 1, Oct 1, Feb 1).

Is this Internship for college credit? (Circle One) Yes No

Do you have housing and transportation (Circle One) Yes No

How did you learn about our program? _____

Three horizontal lines for additional information.