



South Coast Repertory

PROFESSIONAL INTENSIVE PROGRAM APPLICATION

Please complete the following application form, enclose a resume, photograph and \$20 application fee.

You will be contacted to schedule an audition and interview upon receipt of your application.

Mail to:
South Coast Repertory
Professional Intensive Program
P.O. Box 2197
Costa Mesa, CA 92628

NAME (Please Print) Last First MI Sex

ADDRESS Street

City State ZIP

PHONE Day Night E-MAIL ADDRESS

Best way to contact: Phone ____ a.m. or ____ p.m. E-mail ____

Date of Birth Age Weight Height

School presently attending (if any) Degree or class level

PERSON TO CONTACT IN CASE OF EMERGENCY:

NAME PHONE

ADDRESS Street City State ZIP

How did you find out about the SCR's Professional Intensive Program?

____ Brochure ____ Instructor ____ Friend ____ Newspaper/Magazine Ad

____ Newspaper Article ____ www.scr.org Other: _____

If scr.org, how did you find our site? _____

PRODUCTION HISTORY

Include only acting assignments in college, high school, professional and community theatres.

PLAY ROLE PRODUCER YEAR

REFERENCES

Include THREE persons whom we may contact to discuss your background and ability. Include instructors, former directors, and others familiar with your work.

NAME POSITION/TITLE PHONE

PERSONAL STATEMENT

Please print or type a brief summary of your reasons for seeking admission to the Professional Intensive Program. You may include a separate sheet if needed.

I hereby apply for admission to the South Coast Repertory Professional Intensive Program, and certify that the above information is accurate and complete.

Applicant's Signature

Date