



Application Information and Requirements Transition Course Entry 2015

Completing and submitting this Application is the first step towards seeking entry into the Transition Course at the Vocational Ballet College NSW. Further details will be provided to successful applicants.

- 1. You may request a private audition** and indicate your preferred day (Tuesday, Thursday or Saturday)
- 2. Application Form** Countersigned by your parent/guardian if under 18 years of age.
- 3. Other information will also be required** as a condition of acceptance:
 - Copies of your last Educational and Dance Qualifications if any
 - Signed Medical Form Completed by a registered medical practitioner familiar with your case history and countersigned by your parent/guardian if under 18 years of age.

Please send your completed application to:

Auditions - Transition Course
Vocational Ballet College NSW
Unit 3, 18 Anvil Road
Seven Hills, NSW, 2147

APPLICATION FORM FOR ENTRY**COMPLETE IN BLOCK LETTERS PLEASE****APPLICANT - CONTACT DETAILS**

Family name		First Names			
Current address Street & No					
Suburb		Post code		State	
Phone		Mobile			
email					

APPLICANT - PERSONAL DETAILS

Date of Birth/...../.....		Age (at 31/10/of year of application:				
Male		Female		Height (cm)		Weight (Kg)	

EMERGENCY / PARENT / GUARDIAN CONTACT DETAILS

Relationship to applicant:						
Family name		First names				
Current address Street & No						
Suburb		Post Code		State		
Phone		Mobile				

DANCE TRAINING HISTORY

Please indicate, where applicable, the syllabus studied, standard attained and the number of years studied			
Syllabus			
Standard attained		No of years studied	

CURRENT SCHOOL

Current School (Primary or Secondary)	
Address	
Principal's Name	

I WISH TO REQUEST A PRIVATE AUDITION

My preferred day is (Please tick at least one)	Tuesday	Thursday	Saturday

Please note, you may also **attach** any additional information you regard as relevant.

Signature Applicant/Guardian:

Date: