



# SDSCPA THEATRE AUDITION FORM

(Please Print Legibly)

NAME (First and Last): \_\_\_\_\_

GRADE (Please Circle One): 9      10      11      12

PROGRAM (Please Circle One):      Acting      Musical Theatre

Please list any experience you have had that you would like to share. If you have a written resume, you may submit that rather than use this form.

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## RESUME

### Experience:

Write the name of experience, etc.

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### Arts Training:

(include Classes, Performances , Exhibitions, Etc.)

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### Activities & Volunteer Work:

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