

Urban Dance Complex
Pre-Professional Program 2009
Program Application Form

APPLICATION DEADLINE: September 25th, 2010

PLEASE TYPE OR PRINT CLEARLY.

For questions about the application process, contact the Urban Dance Complex at **863-6600** or email info@urbandancecomplex.com

PROGRAM APPLICATION MATERIALS:

A complete application to the **UDC Pre-Professional Program** includes the following items. Applications will not be reviewed until all of the below application materials have been received by the UDC Staff.

- (1) Program Application Form** — to be completed and signed by the applicant; includes personal essay and Parental Authorization Form.
- (2) Copy of your Most Recent Report Card, or High School/College Transcript** — Report Cards/Transcripts may be sent under separate cover or included in a sealed school-issued envelope with other application materials.
- (3) Essay**

APPLICANT INFORMATION

First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: (mo/day/year) ___ / ___ / _____

Gender: (check one) Male Female

APPLICANT CONTACT INFORMATION

Street Address, Line 1: _____

Street Address, Line 2: _____

City, State, Zip Code: _____

Home Phone (with area code): _____

Cell Phone (with area code): _____

E-mail address: _____

EMERGENCY CONTACT INFORMATION — (Applicant's under age 18, please provide Parent/Guardian information.)

First Name: _____

Last Name: _____

Check box if address is the same as above. If not, please provide address below.

Street Address, Line 1: _____

Street Address, Line 2: _____

City, State, Zip Code: _____

Home Phone (with area code): _____

Cell Phone (with area code): _____

RELATION TO APPLICANT: _____

EDUCATION

Current School: _____

Current Grade: _____

Please be sure to include a copy of your most recent report card or transcript

PREVIOUS DANCE EXPERIENCE

1. How many years have you been dancing? ____
2. Please provide information on your dance experience (styles you have taken, classes you have attended, etc.):

CLASSES YOU PLAN TO TAKE (please check all that apply and include the level):

Hip Hop

Level: ____

Jazz Funk

Level: ____

Lyrical

Level: ____

Street Jazz

Level: ____

ESSAY PORTION

Please use **additional pages** for your responses to the following questions (preferably typed):

1. When did you begin dancing and why?
2. Why do you wish to enroll in the UDC Pre-Professional Program?
3. What are your dance goals and/or what would you like to gain from being enrolled in UDC's Pre-Professional Program?

PARENTAL/GUARDIAN STATEMENT OF CONSENT – FOR APPLICANTS UNDER AGE 18

Applicants under age 18 as of **October 1, 2010** must submit the parental authorization acknowledging the program policies below.

PROGRAM POLICIES

The UDC Pre-Professional Program is over an 8-month period, October 2010 – May 2011, with a monthly fee of \$345 due on the first of each month.

It is expected that students in the Pre-Professional Program will:

- **Be on-time,**
- **Be prepared,**
- **Have consistent attendance,**
- **Have a positive attitude,**
- **Maintain a health lifestyle, and**
- **Be respectful of their teachers, their peers and themselves.**

Class absences are recorded. Courtesy follow-up calls to parent/guardians of minor-age students will be made following successive student absences, unless parental authorization has been given prior to each absence.

Students must **attend all Master Classes** that are offered during the year (these are not included in the monthly program fee).

Students must maintain a **GPA of 3.0** or above to remain in the program. Quarterly report cards/transcripts will be required.

Students must participate in at least **one Community Service** activity organized by the Urban Dance Complex during the year.

All monthly payments must be made on-time in order for the student to remain in the program.

I am the legal Parent/Guardian of the above-named Student, who is under eighteen years of age. I have read and acknowledge the UDC Pre-Professional Program’s above stated Program Policies and hereby give consent for *(Insert Student Full Name: First, Last)* _____ to participate in the program with the understanding that these policies will be enforced during the time of his/her participation.

Parent/Guardian Full Legal Name **(Please Print)**

Parent/Guardian Signature

Date