



IMPROVISATION STUDIES PROGRAM

APPLICATION

Please fill out and return this form, along with a **headshot, current theatrical resume, and letter of recommendation** to **Whole World Theatre Company, Attention: Eric Goins, 1216 Spring Street NW, Atlanta, GA 30309**. **If you are cast for the program, you will be asked to pay a one-time \$50 administrative fee. *There are no additional tuition charges for this program.***

Applications may be mailed or dropped off at Whole World Improv Theatre at the above address between 10am and 4pm Tuesday through Friday. Applications are due the 1st of each month a candidate hopes to begin. (For example: Applicants hoping to join the program in February must have their application submitted with payment by February 1) All applications received after the first of each month will be considered with the following month's submitted applications.

PERSONAL INFORMATION:

NAME: _____

ADDRESS
(permanent): _____

EMAIL: _____

TELEPHONE:

Daytime: (____) _____ Evening: (____) _____

DATE OF BIRTH: ____/____/____

EDUCATION:

Please list all colleges/universities from which you hold a degree and all training programs attended.

INSTITUTION: _____ DEGREE: _____ DATE: _____

INSTITUTION: _____ DEGREE: _____ DATE: _____

INSTITUTION: _____ DEGREE: _____ DATE: _____

OTHER TRAINING:

PERSONAL PROFILE:

Please type or print your responses to the following questions on a separate piece of paper and attach to your application.

1. Why have you chosen Whole World Improv Theatre as a place to pursue further training?
2. Who or what have been major sources of inspiration to you in your work?

AUDITION:

Based on the applications, we will be scheduling auditions with selected applicants. Specific information on the format, schedule, and location of the auditions will follow the receipt of your application. The above dates are subject to change.

HOW DID YOU HEAR ABOUT US:

- Friend
- College Professor
- Whole World Theatre staff visit your school
- The Sunday Paper
- Website
- Poster
- Other: _____

STATEMENT OF AGREEMENT:

I certify that all the information in this application is true to the best of my knowledge.

I have read and agree to all terms of this application.

Signature

Please review the following before mailing/dropping off your application.

APPLICATION CHECKLIST:

- Completed and signed application
- Letter of recommendation
(Please indicate if mailed separately)
- Headshot (photo) and resume