

**The University of Southern Mississippi**  
**Department of Dance**  
**AUDITIONEE INFORMATION**

*This form must be received by the **DEPARTMENT OF DANCE**  
at least one week prior to your audition.*

\*If you are interested in auditioning for a scholarship please submit an essay "Why I want to be a dance major at USM" and two (2) letters of recommendation along with the audition form.

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

CURRENT YEAR IN SCHOOL \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

AUDITION DATE AT USM \_\_\_\_\_ TRANSFER \_\_\_\_ FRESHMAN \_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_.

E-MAIL ADDRESS \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

1.) On attached resume, list the following:

- Your background in dance (training, teaching, choreographing, performing, etc.)
- What professional dance artists have you studied with in workshops or over some period of time, or master classes (names, dates, locations)?
- What professional dance artists, companies have you seen in concerts?
- What other dance-related courses have you taken or skills do you have?

2.) Below is a list of possible interests in dance. Check those which are major interests for you at this point in your life:

- |   |  |
|---|--|
| <input type="checkbox"/> Choreography                 | <input type="checkbox"/> Outreach in Dance Education |
| <input type="checkbox"/> Improvisation                | <input type="checkbox"/> Dance Administration        |
| <input type="checkbox"/> Technique                    | <input type="checkbox"/> Arts Advocacy               |
| <input type="checkbox"/> Performance                  | <input type="checkbox"/> Dance Education             |
| <input type="checkbox"/> Dance Writing                |  |
| <input type="checkbox"/> OTHER (Please explain) _____ |  |

3.) What are your career goals? \_\_\_\_\_

4.) How did you hear about the USM Dance Program? \_\_\_\_\_

For Office Use Only:			
<input type="checkbox"/> Forms	<input type="checkbox"/> Essay	_____ Date Received	
<input type="checkbox"/> Résumé	<input type="checkbox"/> Rec. Letter 1	<input type="checkbox"/> Rec. Letter 2	<input type="checkbox"/> Fall <input type="checkbox"/> Spring