

**MA Dance Performance Application Form**

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| **Name :** | |
| **Address:** | |
| **Do you have any health issues that you would like to make us aware of prior to audition? If so please provide details:** | |
| **Day time Telephone Number:** | **Mobile Number:** |
| **E-Mail Address:** | |
| **Brief introduction to yourself and your work/practice:**  Please continue on a separate sheet if required. | |
| **What would you hope to achieve from studying this MA:** | |
| **Professional Reference (Provide an individual who has worked with you in the past two years):** | |

**Thank you**

Please return this form and your C.V via email to [HE.enquiries@dancecity.co.uk](mailto:HE.enquiries@dancecity.co.uk) by 13 April 2019 or in writing to HE Enquiries (Alex Anslow), Dance City, Temple Street, Newcastle Upon Tyne, NE1 4B.