

Department of Theatre

AUDITION FORM



Name _____

Audition Time: _____

USD ID# _____

Year in School _____

Email _____

Date _____

☐ Major _____

☐ Minor _____

☐ Other Faculty/Staff/Admin _____

Local address _____

Cell Number _____

Casting:

Do you speak French?

☐ Yes

☐ No

Will you accept any role?

☐ Yes

☐ No

If you are not cast are you interested in working in any other production area?

(If so, do you have a show preference or job preference?)

☐ Yes *Indicate show preference or job preference* _____

☐ No

- **NOTE: If cast, you will be required to attend and participate in closing strike.**

☐ Not interested in performance

☐ Interested in Tech Opportunity

Indicate show preference or job preference _____

Let the director know if you play an instrument or have music experience in general.

THEATRE EXPERIENCE: *Fill out below and/or attach your resume/headshot, if any.*

(List a sampling of roles you have played and where, classes you have taken, or any related performance experience such as dance, singing, playing musical instruments, public speaking, etc.)

Special skills: *(Cartoon, or character voices, video or projection tech, juggling, foreign language, etc.)*

Physical Training: *(Circle those that apply)*

Ballet Tap HipHop Modern Mime Puppetry Stilts Stage Combat Gymnastics/Acrobatics Other *(Specify):*