

STARS Application

Spotlight Acting School

Student Information:

Name: _____

Age: _____ School? Homeschool or _____

Parent or Guardian: _____

Address: _____

Phone: Number: _____

Email Address: _____

Application Checklist: (Check all that are completed)	
<input type="checkbox"/>	Enrolled in Spotlight Acting School. 3, 6 or 12 months
<input type="checkbox"/>	Recommendation Letter Attached (Spotlight or Public-School Director)
<input type="checkbox"/>	250-word personal essay attached

Below this line for office use.

Checklist completed? _____

Essay Notes:

Audition scheduled: _____ / _____ / _____

Student Parent confirmed: _____