

APPLICATION FORM

Date of Application:	Workshop Applying for:		
Full Name:			
		irst Name	M.I.
Name of School:			
Address:			
Home Address:			
Province:			
Birthdate:		Religion:	
Number of Years Teaching in the Arts:			
SPA:	Arts and Design:	MAPEH/Others:	
Field of Specialization:			
List of most recent major Productions mo	ounted and/or toured: (Please us	se separate sheet if necessary)	
Title and Description:	Role:	Dates & Venue	:
•			
List of most recent major Arts Festivals/C	Competitions (Local/National/ In	ternational) attended:	
(Please use separate sheet if necessary)			
Title of Festival/Competition & Producti	on Presented: Role:	Dates & Venue	
List of most recent major Awards/Recogn			
Title of Award/Recognition:	Awarding Bo	ody: Dates & Venue	
Have you worked/performed/attended in (Please use separate sheet if necessary)	n any CCP programs in the last 3-	-5 years? If yes, please provide details:	'
Title of Production/Event:	Nature of Pa	artnership with CCP: Dates & Venue	
Title of Froduction/ Event.	ivature or Fa	Dates & Venue	•
L cortifu that all information provided a	hove including all attachments	are true and correct, and that any t	falsa information
I certify that all information provided a provided shall merit disqualification of th	_	are true and correct, and that any t	aise iiiiormation
production of the			

Please send the accomplished INDIVIDUAL application form at ccpartsacademy@gmail.com For more details you may contact the CCP Audience Development Division at (02) 8832-1125 local 1602 and 1603.

Printed Name of Applicant & Signature