

CSSSA Dance Application—2012

DEADLINE: February 28, 2012

PLEASE PRINT OR TYPE IN BLUE OR BLACK INK ONLY.

1. DANCE APPLICATION PORTFOLIO

(If you wish to apply to more than ONE department, you must print and complete the application for that department and submit in a separate envelope.)

Dance Audition Format Enclosed (check only one):

() DVD

() mini-DVD

only accepted file types:

.avi, .mov, .wav, .wmv

2. STUDENT INFORMATION

Student First Name: _____ Middle Initial: _____

Last Name: _____

Home Address (mailing): _____

City: _____

State: _____ Zip: _____ California County: _____

Email address: _____

Date of Birth (use numbers): ____/____/____.

Age: _____

Gender: () male () female

Grade Level to be completed as of June 2012: _____

Home Phone: (____) ____-____

Student Cell Phone: (____) ____-____

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3. PARENT/GUARDIAN INFORMATION

Parent/Guardian First Name: _____

Last Name: _____

Home Phone: (____) ____-_____

Business Phone: (____) ____-_____

Parent/Guardian Cell Phone: (____) ____-_____

Email address: _____

4. SCHOOL INFORMATION

Current School: _____

Phone: (____) ____-_____

Street Address: _____

City: _____

State: _____ Zip: _____ California County:

5. ATTENDANCE VERIFICATION

To verify your attendance at a California secondary school, please submit either a current transcript of your academic record, or have your teacher or counselor complete the Attendance Verification form (page 11).

6. RECOMMENDATION INFORMATION

Please identify two people who will complete the Recommendation Forms on your behalf. These people should be schoolteachers, private instructors, or arts professionals in your chosen subject area. Recommendations may be submitted on school stationery if the recommender prefers that, but they **MUST** be enclosed with this application.

FIRST RECOMMENDATION:

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Name: _____

Position: _____

School (if applicable): _____

Street Address: _____

City/County: _____

State: _____ Zip: _____ Country (if outside of US): _____

SECOND RECOMMENDATION:

Name: _____

Position: _____

School (if applicable): _____

Street Address: _____

City/County: _____

State: _____ Zip: _____ Country (if outside of US): _____

7. WHERE DID YOU LEARN ABOUT California State Summer School for the Arts?

Friend Internet Poster Teacher School Administration

Local Arts Organization Other (Specify):

8. CALIFORNIA RESIDENTS ONLY: WHO ARE YOUR LEGISLATIVE REPRESENTATIVES?

State Senator:

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State Assembly Member:

To determine your legislative representatives, go on the Internet to
<<http://www.leginfo.ca.gov/yourleg.html>>.

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9. DO YOU REQUIRE ANY SPECIAL SERVICES FOR REASON OF A DISABILITY?

Physical:

- Legally blind/visually impaired
 - Mobility impairment (including orthopedic)
 - Other impairment (please specify):
-

Communication:

- Speech impairment
- Hearing impairment
- Learning disability

Please describe:

10. ETHNIC INFORMATION This question is voluntary. The California State Summer School for the Arts collects this information to conform to new guidelines from the Federal government. This information will not affect any student's application for admission.

Check one:

- American Indian or Alaska Native
- Asian
- Black or African-American
- Hispanic
- Native Hawaiian or other Pacific Islander
- White
- Other _____

11. EDUCATIONAL INFORMATION

How many years have you studied your primary art form?

- (1) In your school: _____

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(2) Private study: _____

Please describe your education plans beyond high school:

If you attended CSSSA previously, please circle the year(s) and indicate department(s):

() 2008 () 2009 () 2010 () 2011 Department(s):

12. FILING INSTRUCTIONS

Mail all forms, the assignments for your department, and the application fee by February 28, 2012 to the Department you are applying to at:

California State Summer School for the Arts
ATTENTION: Dance Department
P.O. Box 1077
Sacramento, CA 95812-1077

- You MUST write the Department you are applying to on the outside of the envelope.
- A non-refundable \$20 APPLICATION FEE is required:

() CHECK or MONEY ORDER made payable to "CSSSA"

() VISA () MasterCard

Card # _____ Expires Mo. ____ Yr. ____

Three to seven digit number found in signature box on back of card: _____

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org

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California State Summer School for the Arts 2012 Program
RECOMMENDATION FORM
DEADLINE: February 28, 2012

To the Student: **YOU NEED TO PRINT AND SUBMIT TWO OF THESE FORMS!** Two individual adults need to fill out a recommendation form for you. Please make sure that your two recommendations and all other parts of your application, including the Required Assignments, are submitted in the same envelope by February 28, 2012. Your application cannot be completely processed until ALL REQUIRED FORMS AND RECOMMENDATIONS are received. Teachers may submit written recommendations on school stationery, if they prefer.

1. STUDENT INFORMATION

Students please fill in the student information portion of this form before providing it to the individual who will be recommending you.

Student First Name: _____

Last Name: _____

2. RECOMMENDING ADULT: (Teacher, private instructor or other recommending adult).

Name of recommending individual:

—

Recommender's Address:

Street Address:

City:

State: _____ Zip: _____ Email Address:

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Recommender's Phone: (____) _____ - _____

Subject Taught: _____

How many years have you known this student and in what capacity:

Indicate below your evaluation of the applicant:

1. Interest in chosen area:

Below Average Average Above Average Superior

2. Ability in chosen area:

Below Average Average Above Average Superior

3. Character:

Below Average Average Above Average Superior

4. Cooperation:

Below Average Average Above Average Superior

5. Leadership:

Below Average Average Above Average Superior

6. Emotional Maturity:

Below Average Average Above Average Superior

7. Personal Initiative:

Below Average Average Above Average Superior

Additional comments:

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Signature:

Date:

3. RETURN COMPLETED FORM TO STUDENT (May be sealed for confidentiality).

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FINANCIAL AID REQUEST

Financial aid is restricted to CALIFORNIA RESIDENTS. It is not awarded to students attending for a second summer regardless of department.

DEADLINE: February 28, 2012

- This form **must be submitted with the application** if you wish to be considered for financial aid. Your chances of acceptance to CSSSA will not be affected by your financial aid application.
- You **MUST** submit a copy of parent/guardian's 2010 or 2011 (whichever is most recently filed) 1040, 1040A, or 1040EZ tax forms and supplements with this request.
- **DO NOT FILL OUT THIS FORM OR SUBMIT INCOME TAX RETURNS IF YOU ARE NOT APPLYING FOR FINANCIAL AID.**
- THIS APPLICATION MUST BE TYPED OR COMPLETED IN BLUE OR BLACK INK PEN, not pencil.

Student Name:

Home Telephone: (_____) _____ - _____

Street Address:

City, State, Zip:

Parent/Guardian #1 Name:

Business Phone: (_____) _____ - _____

Parent/Guardian #2 Name:

Business Phone: (_____) _____ - _____

1. Parent(s)/Guardian(s)' current marital status (please check one)

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- () Married. (Report income information for both parents, including step-parent.)
- () Widow/Widower. (Report income information of surviving parent.)
- () Separated/Divorced. (Report income information on parent you lived with during the last twelve months.)

2. State of LEGAL RESIDENCE of parent(s)/guardian(s): _____

3. Total size of HOUSEHOLD during 2010-2011 school year including parents/guardians, all dependent children, and other dependents who live with your parents:

4. Parents/Guardians' ADJUSTED GROSS INCOME:

a. Amount earned by Parent/Guardian #1: _____

b. Amount earned by Parent/Guardian #2: _____

5. Total U.S. INCOME TAX PAID (line 60 from Form 1040; line 11 from Form 1040EZ):

6. SOCIAL SECURITY BENEFITS that the entire family received. Omit educational benefits. (Do not report money included in No. 4 above.) You must provide official supporting documentation.

7. AFDC welfare benefits received by family. Report total annual amount, not monthly amounts. (Do not report money included in No. 4 above.) You must provide official supporting documentation.

8. NON-TAXABLE INCOME. Include untaxed unemployment compensation, interest and dividend exclusion, military, or clergy housing allowances, the untaxed portion of capital gains, income from untaxed municipal bonds, child support, non-taxable retirement pay-outs, and non-educational veteran's benefits. (Do not report money included in No. 4 above.)

9. UNREIMBURSED MEDICAL COSTS. Report medical expenses for the family that were not reimbursed. Use the same rules for calculation that the IRS allows, but

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exclude insurance premiums.

10. STUDENT'S INCOME. Enter amount earned:

11. STUDENT'S NON-TAXABLE INCOME. Enter total amount of untaxed income. (Use same definitions as in No. 8.)

12. STUDENT'S SAVINGS. Enter total of checking and savings accounts.

13. PARENT'S CASH SAVINGS. Enter total amount of savings and checking accounts.

14. HOME VALUE. Enter the current market value of your home, condominium, or mobile home.

15. MORTGAGE DEBT. Enter the amount of principal still owed.

16. REAL ESTATE AND INVESTMENTS. Enter market value of other real estate, investments, stocks, bonds, certificates of deposit, precious metals, etc.

17. INVESTMENT DEBT. Enter amount owed on investments in No. 16.

18. BUSINESS OR FARM. Enter the market value of your business or farm. Include inventory.

19. BUSINESS/FARM DEBT. Enter the amount of debt owed on business or farm.

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Exclude non-family partner's share of debt.

20. Total number of family members who are full-time college students.

Mail this form along with your application and materials by February 28, 2012 to:

California State Summer School for the Arts
Attention: Dance Department
P.O. Box 1077
Sacramento, CA 95812-1077

Contact: (916) 229-5160 / (916) 229-5170 (fax) /
www.application@csssa.org

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California State Summer School for the Arts 2012 Program
ATTENDANCE VERIFICATION FORM

POSTMARK DEADLINE: February 28, 2012, with completed application

To the Student: YOU NEED TO PRINT AND SUBMIT THIS FORM, or a transcript.

- A teacher or counselor from your high school must fill out this form for you.
- Please make sure that this form and all other parts of the application are submitted without delay. Your application cannot be completely processed until ALL required forms are received by the California State Summer School for the Arts.

ATTENDANCE VERIFICATION: To verify your attendance at a California secondary school, please submit either a current transcript of your academic record, or have your teacher or counselor complete the following certification:

I certify that _____

(student) submitting this application is a bona fide student at:

_____ school.

Teacher/Counselor Name: _____

Position: _____

Signature: _____ Date: _____

Mail* this form along with your application and materials by February 28, 2012 to:

California State Summer School for the Arts
Attention: Dance Department
P.O. Box 1077
Sacramento, CA 95812-1077

* You MUST write the name of the Department to which you are applying to on the outside of the envelope.

Contact: (916) 229-5160 / (916) 229-5170 (fax) /

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www.application@csssa.org

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Applicants to the Dance program must submit completed applications and teacher recommendation forms and the following **REQUIRED DANCE VIDEO ASSIGNMENTS** on a mini-DVD or full-size DVD. [*ACCEPTABLE file formats for video submission: .avi, .mov, .wav, and .wmv. Please do not include files in a format that is native to the program you are using to edit video (if applicable). Auditions submitted on CD, VHS, Mini-DV, Hi-8, or on any other analog cassette tape will **not** be reviewed.*]

A. Introduction: At the beginning of the video, identify yourself, describe your interest in dance, and tell us how many years of training you have had in ballet and/or modern dance. Tell us what you hope to gain by attending the California State Summer School for the Arts, and discuss your educational and career goals. INTRODUCTIONS SHOULD NOT EXCEED 20 SECONDS -be brief! (**RETURNING STUDENTS ONLY:** You must briefly state your specific learning objectives and reasons for wanting to return to the CSSSA Dance Program. If you previously attended CSSSA in an artistic discipline other than Dance, you must submit a recommendation from a CSSSA instructor in that department).

B. Warm-up: Execute a standing dance warm-up (not to exceed two minutes) that shows your technical strengths and abilities. The warm-up must emphasize strength, stretch, balance, coordination, and rhythm. In center floor, please include jumps and pirouettes. (You may perform this warm-up to music if you wish but it is not required.)

C. Performance/Choreography: Perform one or two dances (not to exceed a total of four minutes) that you have studied and/or choreographed. Describe your selection(s) indicating the choreographer(s) and musical composer(s) at the beginning of this section. Absolutely NO GROUP PERFORMANCE videos will be accepted.

PLEASE NOTE:

- Female applicants MUST wear a leotard and tights or unitard for audition video
- Male applicants MUST wear a T-shirt and tights or unitard for audition video
- NO LOOSE FITTING or street clothing, please.
- Time limits are strictly enforced.
- It is your responsibility to check your video before you send it to us to make certain that it is viewable, and to package it so that it will arrive undamaged. We do not assume responsibility for the loss or damage of your submission. **AUDITION VIDEOS WILL NOT BE RETURNED.**

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Your video will NOT be reviewed unless it is clearly labeled with your name, on both the container and the DVD or Mini-DVD.

Send your (1) **completed application form**, (2) **teacher recommendation forms**, (3) **\$20 application fee**, (4) **your financial aid request with supporting documentation** if applicable, and (5) **your Dance Audition Video** in one package, addressed to: *California State Summer School for the Arts; Attention: Dance Department; P.O. Box 1077; Sacramento, CA; 95812-1077*