

Applying for what School year: (circle one)
2014-2015 2015-2016 2016-2017

CHECK THE BOX!

How did you hear about us?

- Newspaper
- Family/Friend _____
- Playbill
- Conference Booth
- Middle School Orientation
- Current Student/Alumni
- Other: _____



**SALT LAKE SCHOOL FOR THE
PERFORMING ARTS**

MUSIC | DANCE | THEATRE

APPLICATION FOR ENROLLMENT

Please complete all the requested information on this form

And mail or email it to:

Salt Lake School for the Performing Arts

Attn: Registrar

2291 South 2000 East

Salt Lake City, Utah 84106

Kim.Dahle@slcschools.org

For more information:

801-466-6700

Please complete ONE FORM for EACH CHILD applying to the school. PLEASE PRINT CLEARLY

Student Full Name _____

Student Address (Street, City, State, Zip) _____

Phone _____ Date of Birth ____/____/____

Current Grade Level 9th-12th grades (**must attach current transcript***) 8 9 10 11 12 (circle one)

Email _____

Parent/Guardian Name _____

Address (Street, City, State, Zip) _____

Parent/Guardian Phone _____ Parent/Guardian Email _____

List siblings currently enrolled at SLSPA:

1. _____ Grade _____

2. _____ Grade _____

Does your student receive any special services (i.e.p/504) circle one: Yes__ No. Other _____

Last school Attended? _____

Circle all that apply: (to help us predict faculty needs only)

Student's main area of interest is: DANCE VOCAL MUSIC

INSTRUMENTAL MUSIC (What instrument? _____)

ACTOR TRAINING MUSICAL THEATRE TECHNICAL THEATRE

Please turn in completed application. The information listed above is true and correct. *transcript must accompany application. Incomplete applications will not be processed. Any falsification nullifies this application.

Parent/Guardian Signature _____ **Date** _____