

Internship Application

The deadline for applications is July 1, 2017.

2017-2018 Season

Applicant Infor	mation							
NAME (FIRST, MIDDLE, LAST)		ADDRESS	ADDRESS		PHONE NUMBER		EMAIL	
BIRTH DATE (MM / DD	/ YYYY) AT THE ST	ART OF THE SCHO	OOL YEAR, I WILL BI	E A	SCHOOL			GPA
, ,	(indicate on		ŕ					
	freshr	nan sophor	morejunior	seni	or			
What administrat	tive/technical the	eatre areas are	e you most into	erested in	n? (Please rank cho	oices nun	nber 1-8, 1 bein	g most desired.)
Admi	nistration	Set Const	ruction	I	Lighting / Electric	S	Props (Construction
Mark	eting	Costume	Construction	,	Audio / Sound		Stage N	Management
What show run c								
)
	ght Board Operat	_		•		Dec		
Sp	otlight Operator	-	Flyrail Cr	ew		War	drobe Crew	
Are there any the	atrical areas we h	aven't listed i	n which you ha	ave an int	erest? Please des	scribe.		
NA/bat alviba anaut				وا بروي النب			*h ====in=	
What clubs, sport Please describe and				wiii you b	e participating in	n during	tne upcoming	school year?
Ticase describe and	give times, days or	the week, ii po	33101C.					
Please fill out the	table below base	d on what vou	ı believe will be	e vour "tv	pical" weekly sch	nedule d	uring the <i>fall</i> s	semester—
i.e., for technical r		-		-	•			
	MON	TUE	WED	TH	HU FR	tl .	SAT	SUN
ARRIVE BY:								
LEAVE BY:								
Please fill out the	tahle helow hase	d on what you	ı helieve will he	e vour "ty	nical" weekly sch	nedule d	uring the cari r	aa semester
r lease iiii out the	MON MON	TUE	WED		HU FR		SAT	SUN
ARRIVE BY:	IVIOIV	TOL	VVLD	- ''	10 110	VI	- JA1	3011
LEAVE BY:								
					l			
Please describe yo	our transportation	n to CFRT.						
Parent/Guardia	an Informatior	(if applicar	nt is under 18	8)				
NAME		HOME PHON	NE NUMBER	CELL PHOI	NE NUMBER	EMAIL		
		IMPORTAN	IT NOTICE –	PLEASE	READ AND IN	IITIAL		
Vorking as show re	un crew during a	CFRT producti	on is a significa	ant profes	ssional commitme	ent, req	uiring at least	4 hours per day,
days a week dur production and to t	ring the duration	of show perf	ormances. Cor	nsistency	is important to	maintai	ning the artist	ic integrity of a
hat they will make	all reasonable ef	forts to be ful	ly available for	any prod	luctions to which	they are	assigned.	it acknowledges
-			•		nce of commitme	•	•	nts.
			_	•			_	
	I, the parent/gu commitment to			ider 18), ι	understand and a	igree to	the importance	e of



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Have you volunteered a	at CFRT before? If so, what did you do, and	d when?		
Have you volunteered i CFRT? If so, please desc	n a technical or administrative position in cribe.	a theatre or other arts/en	ertainment group outsi	de of
Do you have any acting	experience? If so, please describe.			
Are there any academic	or other accomplishments you would like	e to mention? Please descr	ibe.	
Website	t the CFRT Internship Program? Teacher (Name)	Current Int (Name)		
Website (Name) Other Reference Informat Please provide two but are not limited	Teacher (Name)	(Name)	Potential references car	n include ference
Website (Name) Other Reference Informat Please provide two but are not limited	Teacher (Name) cion o (2) references we may contact in conside d to, teachers, youth group leaders, or coa	(Name) eration of your application. iches. Friends and family m	Potential references car embers are not viable re	n include ference:
Website (Name) Other Reference Informat Please provide two but are not limited NAME Personal Statemen Please write and Why do you What are yo	Teacher (Name) cion o (2) references we may contact in consider to, teachers, youth group leaders, or coal INSTITUTION & POSITION INSTITUTION & POSITION at attach a brief, one-page statement which a want to be a CFRT intern?	PHONE NUMBER PHONE NUMBER PHONE NUMBER	Potential references car embers are not viable re EMAIL	n includo ference
Website (Name) Other Reference Informat Please provide two but are not limited NAME Personal Statemen Please write and Why do you What are yo	Teacher (Name) cion o (2) references we may contact in consider to, teachers, youth group leaders, or coal institution & POSITION INSTITUTION & POSITION INSTITUTION & POSITION at diattach a brief, one-page statement which want to be a CFRT intern? Our goals? CFRT internship help you with your future	PHONE NUMBER PHONE NUMBER PHONE NUMBER	Potential references car embers are not viable re EMAIL	n include ference

Address all correspondence including applications and statements no later than July 1, 2017, to:

Cape Fear Regional Theatre, ATTN: Molly Malone, 1209 Hay Street, Fayetteville, NC 28305 or mmalone@cfrt.org