

Theatre & Dance

MINNESOTA STATE UNIVERSITY, MANKATO

Application for Admission to the Graduate Program in Theatre & Dance

Return to: Dr. Paul J. Hustoles, Chair
 Department of Theatre & Dance
 Minnesota State Mankato
 201 Performing Arts Center
 Mankato, MN 56001

Name of Applicant _____

Address _____

City _____ State _____ Zip _____

E-mail address _____

Phone number _____ Social Security No. _____

I am interested in:

- MFA in Acting
- MFA in Musical Theatre
- MFA in Directing
- MFA in Design/Technical
 - Costume Scenic Lighting
 - Technical Sound Design
- MA/MS Degree in Theatre

Anticipated Date of Enrollment:

Fall 200__

- I have applied for a Graduate Assistantship
- I need an application for a Graduate Assistantship

In order of preference (1-9), please mark the areas in which you would most like to serve if granted an assistantship:

- | | | |
|-----------------------------------|------------------|------------------------|
| _____ Teaching Acting/Intro Class | _____ Scene Shop | _____ Costume Shop |
| _____ Theatre Management | _____ Properties | _____ Lights |
| _____ Student Recruitment | _____ Sound | _____ Public Relations |

NOTE: Graduate Assistants serve the Department. We will do our best to accommodate your preference, if possible.

You must include a resumé with this application and send a portfolio under separate cover. The portfolio will be returned to you as soon as possible. Check which items you are including in your portfolio (you MUST include a sample of your formal writing):

- | | |
|--|---|
| <input type="checkbox"/> Sample of formal writing (<u>mandatory</u>) | <input type="checkbox"/> Photos/slides of completed work |
| <input type="checkbox"/> Prompt books of shows directed | <input type="checkbox"/> Renderings/photos of models |
| <input type="checkbox"/> Appropriate reviews or criticisms of shows | <input type="checkbox"/> Working drawings and/or patterns |
| <input type="checkbox"/> Audition audio or video tape | <input type="checkbox"/> Other: _____ |

Letters of recommendation have been requested from:

- | Name of Reference | Address | Title |
|-------------------|---------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |