

Castle Grounds, Cathays Park, Cardiff CF10 3ER • Maes Y Castell, Parc Cathays, Caerdydd CF10 3ER
Academic Services • Gwasanaethau Academaidd
029 2039 1327 admissions@rwcmd.ac.uk

**APPLICATION FOR MASTER OF ARTS IN
STAGE MANAGEMENT
September 2012**

| TITLE / NAME / CONTACT DETAILS | FURTHER DETAILS | |
|---|--|---|
| Title: Surname / Family Name: Forenames: Correspondence Address: Postcode: Tel. No: Dates at this address: | Date of Birth: Gender: Nationality: Country of Birth: Date of first entry to live in UK: Area of Permanent Residence: Local Education Authority: | |
| Home Address (if different): Postcode: Tel. No. Mobile Tel. No: Email address(es): Contact Fax. No: Previous Surname / Family Name: | Next of Kin: Relationship to you: Contact tel no: | <p align="center">PLEASE ATTACH A RECENT PASSPORT PHOTO OF YOURSELF HERE</p> |

What is your preferred means of communication? Please tick appropriate box(es):

| | | | | | |
|--------|--------------------------|-------|--------------------------|-------------------------------|--|
| Letter | <input type="checkbox"/> | Email | <input type="checkbox"/> | Other (<i>please state</i>) | |
|--------|--------------------------|-------|--------------------------|-------------------------------|--|

Forthcoming dates: Closing Date for applications: **31 May 2012**

Interviews will be held at RWCMD in Cardiff in June

Please inform the Admissions staff if your availability is likely to be restricted at these times.

Use this page to give full details of your education and qualifications gained to date, starting with the most recent. Details of the College's normal entrance requirements may be found in the prospectus or on the College website.

1. HIGHER EDUCATION (College / University) - *Degree, Diploma etc.*

| Name of Institution | Dates | Title of Course e.g. BA Hons Degree | Subject/s | Grade / Class | Date Obtained |
|---------------------|-------|--|-----------|------------------|------------------|
| | | | | | |

2. SCHOOL / COLLEGE EDUCATION (Advanced) - *A Levels, Scottish Highers, BTEC, GNVQs etc.*

| Name of Institution | Dates | Title of Course e.g. A Level | Subjects | Examining Body | Grade / Class | Date Obtained |
|---------------------|-------|---------------------------------|----------|-------------------|------------------|------------------|
| | | | | | | |

3. OTHER RELEVANT QUALIFICATIONS OR MEMBERSHIP OF ANY PROFESSIONAL BODIES or other activities eg community work, sporting achievements, Duke of Edinburgh Awards, first aid qualifications

| Name of Course and Body | Dates | Qualification / Experience gained | Other Relevant Info |
|-------------------------|-------|-----------------------------------|---------------------|
| | | | |

4. ON A SEPARATE SHEET, please write a short personal statement (300-400 words) in support of your application.

Areas to consider in this statement are: the reasons behind your decision to undertake a professional training; your experience in theatre; details of any professional theatre or event work or work experience; an indication of your intended specialism .; some indication of your employment ambitions e.g. where or for whom you would like to work in the future. Please attach the sheet to this application form clearly stating your name and the course you are applying for at the top.

5. SPECIFIC REQUIREMENTS

Please indicate if you have any physical or other disability or medical condition including any which might necessitate specific arrangements or facilities (e.g. dyslexia, diabetes, epilepsy, asthma, partial sight, bronchial complaints, mobility difficulties.) *The information that you supply will be treated in the strictest confidence and will help us to cater for your needs - the College operates on an equal opportunities basis and your application will not be prejudiced by any information that you supply.*

6. PLEASE GIVE THE NAME AND FULL POSTAL ADDRESS OF YOUR CURRENT COLLEGE / UNIVERSITY OR PLACE OF FULL-TIME EMPLOYMENT (IF APPROPRIATE). *If employed, please state nature of work.*

7. LANGUAGES? Please tick appropriate box and complete table for other languages

| Language (other than English) | First Language | Second Language | Learner | Not at all |
|-------------------------------|----------------|-----------------|---------|------------|
| Welsh | | | | |
| | | | | |
| | | | | |

Please state any English Language Qualifications held (for example IELTS, TOEFL) if applicable.

| Qualification Title | Level |
|---------------------|-------|
| | |
| | |

8. WHAT WAS YOUR MAIN SOURCE(S) OF INFORMATION ABOUT THE COLLEGE? Please tick.

| | | | | | | | |
|----------------|--------------------------|---------------|--------------------------|---------------------------------|--------------------------|-----------------|--------------------------|
| Our Prospectus | <input type="checkbox"/> | Our Website | <input type="checkbox"/> | School / college | <input type="checkbox"/> | Careers advisor | <input type="checkbox"/> |
| Own knowledge | <input type="checkbox"/> | Word of Mouth | <input type="checkbox"/> | Other (<i>please specify</i>) | | | |

9. PLEASE GIVE DETAILS OF ANY OTHER COURSES THAT YOU ARE APPLYING FOR:

| | | | | |
|--------------|--|--|--|--|
| Institution: | | | | |
| Course: | | | | |

10. Please state if you have a criminal conviction. Please Tick.

| | | | |
|-----|--------------------------|----|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

**Relevant convictions are those for offences against the person, whether of a violent or sexual nature, and convictions for offences involving unlawfully supplying controlled drugs or substances where the conviction concerns commercial drug dealing or trafficking. Convictions that are spent (as defined by the Rehabilitation of Offenders Act 1974) are not considered to be relevant. If you tick yes, you may be required to provide further details.*

NOTE: For courses involving work with children or vulnerable adults, any criminal convictions, cautions (including verbal cautions), reprimands, final warnings and bind-over orders are exempt from the Rehabilitation of Offenders Act 1974

11. Declaration: I confirm that the information given on this form is true, complete and accurate.

If the Royal Welsh College of Music and Drama has reason to believe that I or any other person has given false information or have omitted any information requested in the application form, or made any misrepresentation, the College will take whatever steps considered necessary to establish the authenticity of my application. I accept that if I do not fully comply with these requirements, the College reserves the right to cancel my application and I shall have no claim against the College.

Under the Data Protection Act 1998 we must seek your consent in order to hold and process personal information about you.

The information that you provide

- is for academic and administrative purposes and will only be disclosed to staff who have responsibility for these areas
- may be used for statistical analysis and monitoring by the College
- may be used under the College's requirement to return data to statutory agencies, including the Student Loans Company.

By signing below, you give your consent to the processing of this information for these purposes.

SIGNATURE OF APPLICANT: **DATE:**

If submitting an electronic copy please tick the box to give your consent to the processing of this information for the above purposes

REFEREE DETAILS

Please provide the names of two referees. For recent graduates (less than 18months) one of the referees should be from your college or university.

| | | | |
|-------------------|--|---------------|--|
| Name: | | | |
| Address: | | | |
| Position: | | | |
| Telephone: | | E mail | |
| Signature: | | Date | |

| | | | |
|-------------------|--|---------------|--|
| Name: | | | |
| Address: | | | |
| Position: | | | |
| Telephone: | | E mail | |
| Signature: | | Date | |

Please ensure that you have attached the following items to your application form: passport photo, personal statement, CV, Equal Opportunities monitoring slip. *Incomplete application forms will not be considered.*

Completed application forms should be sent to the Drama Admissions Officer at the address shown on the front of the form

EQUAL OPPORTUNITIES - Applicant Monitoring Slip

The following questions are designed to help us monitor the effectiveness of our Equal Opportunities Policy and will be used for no other purpose. The information is completely confidential and **WILL NOT** be used in the selection process.

Please complete the details below and return with your application form.
 Thank you for your assistance.

| | | |
|---------------------|------------------------|------|
| Course applied for: | MA in Stage Management | |
| Surname: | | |
| Forenames: | | |
| Date of birth: | | Age: |

Please tick the appropriate boxes:

I am: Female Male

I am: A fluent Welsh speaker A Welsh speaker, but not fluent
 Not a Welsh speaker

Would you prefer to receive communications from the College through the medium of Welsh, where available?

Yes No

Do you have a disability or a particular need? Yes No

Do you need any equipment or support to enable you to attend an audition/interview or other selection process? Please specify (this will help to ensure that you are fully enabled to give your best at audition/interview). _____

What is your ethnic group?

Choose one section from A to E, then tick the appropriate box to indicate your background.

| | | |
|---|--|---|
| <p>A <input type="checkbox"/> White [10]</p> | <p>C Asian or Asian British</p> <p><input type="checkbox"/> Indian [31]</p> <p><input type="checkbox"/> Pakistani [32]</p> <p><input type="checkbox"/> Bangladeshi [33]</p> <p><input type="checkbox"/> Chinese [34]</p> <p><input type="checkbox"/> Other Asian background [39]</p> | <p>D Mixed</p> <p><input type="checkbox"/> White and Black Caribbean [41]</p> <p><input type="checkbox"/> White and Black African [42]</p> <p><input type="checkbox"/> White and Asian [43]</p> <p><input type="checkbox"/> Other mixed background [49]</p> |
| <p>B Black or Black British</p> <p><input type="checkbox"/> Caribbean [21]</p> <p><input type="checkbox"/> African [22]</p> <p><input type="checkbox"/> Other Black background [29]</p> | <p>E Other</p> <p><input type="checkbox"/> Other ethnic background [80]</p> <p><input type="checkbox"/> Prefer not to say [98]</p> | |