**Summer 2017 Youth Apprenticeship Application**

**DEADLINE: May 19, 2017**

**Complete the following form and return it via email to** **info@odysseytheatre.ca****. Please ensure that forms completed by hand are clear and legible. Send hard copies to:**

**Odyssey Theatre
2 Daly Avenue
Ottawa, ON**

**K1N 6E2**

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**FIRST NAME LAST NAME AGE**

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**STREET ADDRESS CITY PROVINCE POSTAL CODE**

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**PHONE NUMBER EMAIL ADDRESS**

**EDUCATION (SELECT ONE)**

 [ ]  **HIGH SCHOOL** **[ ]  UNIVERSITY/COLLEGE**

 **GRADE: YEAR:**

 **PROGRAM:**

**ARE YOU AVAILABLE FOR THE WHOLE SUMMER OR PART OF IT? ☐WHOLE ☐PART**

**IF PART OF THE SUMMER, PLEASE LIST THE DATES YOU ARE AVAILABLE:**

**PLEASE INDICATE ANY DAYS OR TIMES DURING THE WEEK THAT YOU ARE NOT AVAILABLE.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **SUN.** | **MON. \*** | **TUES.** | **WED.** | **THURS.** | **FRI.** | **SAT.** |
| **MORNING****(9am – 1pm)** |  |  |  |  |  |  |  |
| **AFTERNOON****(1pm-4pm WED)****(1:30pm-5:00pm SAT&SUN)** |  |  |  |  |  |  |  |
| **EVENING****(6:30pm-10:30pm)** |  |  |  |  |  |  |  |

**\*Participants will have Monday’s off starting July 25th, with the exception of August 22.**

**DO YOU HAVE A DRIVER’S LICENSE/CAR?** **[ ]  YES** **[ ] NO**

**ARE YOU INTERESTED/AVAILABLE TO PARTICIPATE IN BRANCHING OUT? [ ]  YES [ ] NO**

**PLEASE RANK THE FOLLOWING APPRENTICESHIP SPECIALIZTIONS BY IN ORDER OF PREFERENCE (1 BEING MOST PREFERED, 6 BEING LEAST PREFERED)**

**DIRECTING STAGEMANAGEMENT**

**FRONT OF HOUSE PERFORMANCE**

**ADMINISTRATION TECHNICAL**

**WHAT BACKGROUND DO YOU HAVE IN THEATRE?**

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**PLEASE LIST ANY SPECIAL SKILLS YOU MAY HAVE (GYMNASTICS, JUGGLING, DANCING, SINGING, PLAYING AN INSTRUMENT, ETC.)**

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**WHAT DO YOU HOPE TO GET OUT OF YOUR EXPERIENCE WITH ODYSSEY? WHAT ARE YOUR GOALS FOR THE APPRENTICESHIP?**

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**TELL US ABOUT SOMETHING THAT YOU’VE DONE THAT SHOWS INITIATIVE.**

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**IS THERE ANYTHING ELSE YOU WOULD LIKE TO TELL US ABOUT YOURSELF?**

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**PLEASE ATTACH A COPY OF YOUR RESUME DETAILING WORK AND VOLUNTEER EXPERIENCE AND**

**TWO (2) REFERENCES (TEACHERS, PREVIOUS/CURRENT EMPLOYERS) TO THIS APPLICATION.**

**THANK YOU FOR YOUR INTEREST IN ODYSSEY THEATRE’S SUMMER APPRENTICESHIP PROGRAM.**