



# Spotlight Dance Company

## Student Assistant Application

Student Name: \_\_\_\_\_

Student Email: \_\_\_\_\_ Birthday: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

Parent Names: \_\_\_\_\_ Email: \_\_\_\_\_

Student Phone #: \_\_\_\_\_ Parent Ph. #: \_\_\_\_\_

### Availability:

\*Please indicate the hours you are available and the number of hours you are wanting to assistant and the ages you would like to assist with below.

Monday: \_\_\_\_\_

Tuesday: \_\_\_\_\_

Wednesday: \_\_\_\_\_

Thursday: \_\_\_\_\_

Briefly list your experience working with children in a dance and /or non-dance setting:

Please write a short paragraph on why you would like to be a student Assistant and what you hope to gain from the experience: (write on back if additional space is needed)

Student  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I give my child permission to participate in the SDC Student Assistant Program and will help them fulfill their commitments to the assistant schedule they are assigned.

Parent  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_