APPLICATION FOR INTERNSHIP AT 24/7 DANCE STUDIO

NAME:	DATE OF BIRTH:
ADDRESS:	
YOUR EMAIL ADDRESS:	
WHAT DAYS OF THE WEEK AND HOURS ARE	E YOU AVAILABLE? DAYS / EVENINGS
WHAT GRADE ARE YOU IN? DO Y	OU DRIVE?
WHY ARE YOU INTERESTED IN INTERNING A	AT 24/7 DANCE STUDIO?
WHAT QUALITIES, SKILLS OR EXPERIENCE D	
GOOD CANDIDATE FOR INTERNING AT 24/7 I	DANCE STUDIO? (LIST ANY PREVIOUS WORK
OR VOLUNTEER EXPERIENCE)	
BY SIGNING BELOW, I AFFIRM THAT THE FACTS	AND OPINIONS ABOVE ARE TRUE AND COMPLETE.
SIGNATURE:	DATE: