



Musical Theatre Internship – Application 2020

PERSONAL INFORMATION

NAME _____
ADDRESS _____
CITY, STATE, ZIP _____
PHONE _____
EMAIL _____
DATE OF BIRTH _____
EDUCATION (NAME OF HIGH SCHOOL,) _____
PROJECTED DATE TO RECEIVE DIPLOMA _____
NAME OF NOMINATING THEATRE TEACHER _____
DATES OF AVAILABILITY _____



UTAH
HIGH SCHOOL
MUSICAL THEATER
AWARDS