



Apprentice Performing Program 2018: Application Form

Date: _____ First Name(s): _____

Last Name: _____ Birthday (MM / DD / YY): _____

Address: _____ Town, Province: _____

Grade / University Year: _____ Email: _____

Home Telephone: _____ Cell Phone: _____

Signature: _____

Parent / Guardian 1 (for applicants 18 yrs and younger): _____

Cell Phone: _____ Email: _____

Signature: _____

Parent / Guardian 2 (for applicants 18 yrs and younger—Optional): _____

Cell Phone: _____ Email: _____

Signature: _____

Citizenship: Canadian Permanent resident (as defined by Citizenship and Immigration Canada)

Other, please specify (and list any dual-citizenships): _____

Newcomer or Immigrant: Yes, in this year: _____ No



Languages: English French Other, please specify: _____

Do you identify as a person of...

Indigenous / First Peoples of Canada: Yes: Inuit Métis First Nations No

Ethno-Cultural Origin: Yes: Person of African, Asian, South Asian, South East Asian, Middle Eastern, Latin American, or mixed racial heritage
 Indigenous person from outside of Canada
 No

Disability: Check this box if you identify as a person with a disability. Please specify: _____

I am (Check all that apply):

- Motivated to further the development of my artistry in a professional context
- Considering a career in the dance industry
- Aspiring to a paid contract with SQx following completion of this Apprenticeship Program

I would also like to Apprenticeship with SQx because (please list 2 reasons):

1) _____



2) _____

I struggle with (please explicate 2 challenges in your life):

1) _____

2) _____

Name of Current or Most Recent Training Program or Dance School: _____



Please describe prior injuries (2 years):

Please describe any surgeries in lifetime:

Please describe any chronic health issues:

Please describe all medications / prescriptions you are currently taking:

Please describe any allergies:

Special dietary requirements (e.g.: vegan, vegetarian, gluten-free):



Please describe your leadership, collaborative problem-solving, and teamwork skills:

How do you perform under or cope with pressure and stress?

Do you have any siblings? If yes, ages?

Do you currently live at home, with roommates, or alone? _____

Do you get car sick?

Yes

No

Are you a smoker?

Yes

No

Describe Yourself

Please use this list of common human traits (on the following page) to describe yourself as accurately as possible. Describe yourself as you see yourself at the present time, not as you wish to be in the future. Describe yourself as you are generally or typically, as compared with other persons you know of the same gender and roughly the same age.

Before each trait, please write a number indicating how accurately that trait describes you, using the following rate scale:

Inaccurate					Accurate			
Extremely 1	Very 2	Quite 3	Slightly 4	Neither 5	Slightly 6	Quite 7	Very 8	Extremely 9



<input type="radio"/>								
Active	Cold	Distrustful	Harsh	Innovative	Negligent	Rude	Talkative	Undemanding
<input type="radio"/>								
Agreeable	Complex	Efficient	Helpful	Insecure	Nervous	Self-Pitying	Temperamental	Undependable
<input type="radio"/>								
Anxious	Conscientious	Emotional	High-strung	Intellectual	Organized	Selfish	Thorough	Unemotional
<input type="radio"/>								
Artistic	Considerate	Energetic	Imaginative	Introspective	Philosophical	Shallow	Timid	Unenvious
<input type="radio"/>								
Assertive	Cooperative	Envious	Imperceptive	Introverted	Pleasant	Shy	Touchy	Unexcitable
<input type="radio"/>								
Bashful	Creative	Extraverted	Imperturbable	Irritable	Practical	Simple	Trustful	Unimaginative
<input type="radio"/>								
Bold	Daring	Fearful	Impractical	Jealous	Prompt	Sloppy	Unadventurous	Uninquisitive
<input type="radio"/>								
Bright	Deep	Fretful	Inconsistent	Kind	Quiet	Steady	Uncharitable	Unintellectual
<input type="radio"/>								
Careful	Demanding	Generous	Inefficient	Moody	Relaxed	Sympathetic	Uncooperative	Unintelligent
<input type="radio"/>								
Careless	Disorganized	Haphazard	Inhibited	Neat	Reserved	Systematic	Uncreative	Unkind
<input type="radio"/>								
Unreflective	Unrestrained	Unsophisticated	Unsympathetic	Unsystematic	Untalkative	Verbal	Vigorous	Warm
<input type="radio"/>								
Withdrawn								



I understand that should I be accepted into the Apprentice Performing Program I will be required to provide:

- Criminal Record Check (Vulnerable Sector)
- Doctor’s Note—detailing preexisting conditions, injuries, medications, and previous surgeries.

I also understand that my acceptance into the program is not confirmed until these documents are received by SQx. Should these documents not be received in a timely manner, my contract may be transferred to the next eligible candidate.

Signature of Candidate

_____ Date: _____

DECLARATION

I AFFIRM THAT that the information that I have provided in this application is accurate and complete, and that I have fairly represented myself.

Signature of Candidate

_____ Date: _____

I, _____ (Print Parent or Legal Guardian Name—for participants 18 yrs. & under), affirm that the information provided in this application accurately and completely represents by son / daughter. I warrant that my son / daughter is physically fit and able to participate in the program.

I agree to release and indemnify SQx from and against any claim, demand, or liability for injury, loss, or damage whatsoever and howsoever caused.

Signature of Parent or Legal Guardian:

_____ Date: _____

Additional Information:
