

1556 Wisconsin Avenue, NW Washington, DC 20007 PHONE: 202-333-2202

E-MAIL: NCDADRAMA@aol.com www.TheConservatory.org

Application for Admission

Semester: [] Fall 20 [] Spring 20 [] Summer 20		Session:	<u>Session</u> : [] Day: M-F, 11AM – 3PM [] Eve: M-F, 6PM – 10PM		
Name:	First	Middle			
Address:Number and Street			Apt.		
City		State	Zip	-	
Telephone: (Home) ()		(Mobile) ()			
Primary Email:					
Date of Birth:/			itizen? []Yes []No		
If No, what citizenship do yo	ou hold?				
Country:	T	ype of Visa		-	
Military Service: Are you a	Veteran? []Yes []I	No			
Eligible for VA Education Bend	efits? []Yes []I	No Which Benefit Pr	ogram <u>?</u>		
	Privacy Ac	t Statement			
Information in this section is redisclosure is voluntary. Pleas [] Nonresident Alien [] Black or African American [] Native Hawaiian of Other Pacific	equested solely for the page check one of the follo [] Two or mo [] White	ourpose of required sta wing that best describer ore races	es your ethnic background:] Hispanic – any race		

Parent Info. needed only for those under 21 years of age Father's Name Mother's Name Address Address E-mail Cell Phone Cell Phone Emergency Contact – Needed for all Apps. Spouse's Name_____ Name Relationship Cell Phone____ E-Mail_____ Cell Phone____ Medical 1. Do you have any Medical Conditions that we should know about while you are in school? 2. Are you currently under the care of a physician or taking part in therapy that we should be aware of while you are in school? 3. Are you taking any medications that we should be aware of while you are in school? 4. Do you have any allergies of which we should be aware? Educational Background - list all previous schools/colleges attended is required Name of High School City/State Yrs. Attended Grad. Date Name of 1st College-Undergrad City/State Yrs. Attended Grad. Date Name of 2nd College-Undergrad City/State Yrs. Attended Grad. Date Grad School/Other Training City/State Yrs. Attended Grad. Date

Goal Statement (Or e-mail it to NFicca@theCo Please tell us what lead you to your decision to purgoals.	nservatory.org) rsue the study of acting, a professional career, and your
calling 202-333-2202.	
Your school can send transcripts directly to the National	Date in obtaining transcripts from your High School or College. I Conservatory of Dramatic Arts, or they may be given/sent to not need to wait for transcripts to arrive before submitting you

^{*} Request for Transcript form is provided to assist you in obtaining transcripts from your High School or College. Your school can send transcripts directly to the National Conservatory of Dramatic Arts, or they may be given/sent to you as long as they are in a sealed envelope. You do not need to wait for transcripts to arrive before submitting your application package. NOTE: If you are unable to obtain official transcripts due to Covid 19 closure of county, state or school offices you may submit a signed attestation of completion/graduation from high school and/or college/graduate school with your application package.

^{**} The application fee is fully refundable if requested by the applicant within three days of submitting the application for admission to the school if the wish is to withdraw the application to NCDA. Students may also request a refund if:

1) are accepted for admission and decide not to enroll at NCDA, or 2) are denied admission to NCDA. To request a refund, you must e-mail your request to NFicca@TheConservatory.org The request must include your name and the address to which the refund check should be mailed. Refunds will be processed and mailed within three business days from the date of receipt of the emailed request. NOTE: the application fee is being waived through the end of 2020



1556 Wisconsin Avenue, NW Washington, DC 20007 202-333-2202 NCDADRAMA@aol.com TheConservatory.org

REFERENCE SHEET

Please list three (3) references whom we may contact. You should consider listing individuals who know you professionally or in an educational setting.

(1) Name:
Relationship:
Email and Phone Number:
(2) Name:
Relationship:
Email and Phone Number:
(3) Name:
Relationship:
Email and Phone Number:

Be sure to include area codes with the telephone numbers.



To: Records Office

1556 Wisconsin Avenue, NW Washington, DC 20007 202-333-2202 NCDADRAMA@aol.com TheConservatory.org

REQUEST FOR TRANSCRIPT

NOTE: If you are unable to obtain official transcripts due to Covid 19 closure of county, state or school offices you may submit a signed attestation of completion/graduation from high school and/or college/graduate school with your application package.

This form is provided to remind you that you need obtain an official transcript as a part of the Conservatory's application process. This is a requirement of the US Department of Education. You may submit a transcript from your high school, undergraduate or graduate school as long as the document is official. You may submit a college transcript even if you didn't complete a degree

For most colleges you will be able to request a transcript on-line. High school transcripts will likely require a visit to the school and/or a form like the one provided below to give the registrar's office permission to release your records. Be sure to review your school's transcript policy first. Some schools require a fee to send your transcripts, which must be paid by the student.

Name of Institution			
Street Address			
City	State	Zip	
I am Requesting that a copy of my official tran The National Conservatory of Dramatic Arts 1556 Wisconsin Ave. NW Washington, DC 20007	script be sent to:		
Name of Student			
Current Address			
Date of Graduation or GED			
Signature of Student	Date		