iTheatrics Academy Internship Application

Applicant Name: _____

Preferred Name *(optional)*: _____ Preferred Pronouns: _____

Birth Date: _____

Current School: _____ Current Year In School: _____

Email: _____ Phone: _____

Twitter: _____ Instagram: _____ TikTok: _____

Mailing Address: _____

How were you referred to us? _____

Why do you want to intern for us? _____

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Please submit a resume listing relevant theatrical and educational experience, as well as anything else you would like us to know about you.