

## Royal Manitoba Theatre Centre Assistants Program



Name: \_\_\_\_\_ Pronouns: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Artistic Disciplines(s) (please check):

Lighting Design

Sound Design

Choreography

Set Design

Direction

Properties

Costume Design

Music Direction

Other: \_\_\_\_\_

Have you received a Royal MTC scholarship, apprenticeship, or assistant position in the past?

Yes ☐ No ☐

Have you acquired funding from an outside body to support this position? (Please note that this will not deter from selection) If Yes, from which organization(s)?

Yes ☐ No ☐ \_\_\_\_\_

Are you a CAEA member? Yes ☐ No ☐ Are you an ADC member? Yes ☐ No ☐

Relevant Training/Post-Secondary Institution Attended: \_\_\_\_\_

Location: \_\_\_\_\_ Program: \_\_\_\_\_

Length of Program: \_\_\_\_\_ Year of Completion: \_\_\_\_\_

Optional: If you self-identify as a member of an equity-deserving community, you may provide information here: \_\_\_\_\_

Declaration:

- ☐ I am a Canadian Citizen or a permanent resident of Canada.
- ☐ I am a resident of Manitoba.
- ☐ I have read and understand the eligibility criteria and guidelines
- ☐ I accept the conditions of Royal MTC's assistant program
- ☐ I have read and understand the "Additional Information" section.

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_