



**TEACHER TRAINING PROGRAM
PROFESSIONAL DANCER PROGRAM
APPLICATION FORM 2021/2022**

NAME _____
FIRST MIDDLE LAST

DATE OF BIRTH _____ **Age on September 1st, 2021** _____
MONTH/DAY/YEAR

HOME ADDRESS _____

_____ **POSTAL CODE/ ZIP**

HOME TELEPHONE _____

EMAIL ADDRESS _____

Nationality: Canadian _____ Landed Immigrant _____ Other _____

What is your first language? English _____ French _____ Other _____

Have you trained at NBS before? Yes _____ No _____

If so, when and for how long? _____

If not, where did you receive your training? _____

Are you taking class now? Yes _____ No _____ Where? _____

Do you have any teaching experience? Yes _____ No _____

If so, please give details - levels of students, how many hours per week, for how long etc. on the back of this form.

Please give two references that may be contacted:

NAME TITLE PHONE #

NAME TITLE PHONE #

Please attach a copy of your curriculum vitae (if not already submitted).

Please scan and email to registrar@nbs-enb.ca