



**DUE TUESDAY, AUG. 25**

**NAME:**

**GRADE LEVEL:**

**REQUESTED AREA OF CONCENTRATION:**

**(options include acting, dance, voice, film, or other areas of interest)**

**MY GOAL (what I want to accomplish):**

**MY PROCESS (how I want to accomplish my goal in lessons):**

*(please continue on page 2)*

**MY RATIONALE (why I want to do this):**

**OPTIONAL:**

**I would like to request the following partner:** \_\_\_\_\_

**We have these off periods in common:** \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Approved by Theatre Focus Faculty:**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**