

☐ I am applying to the New York Campus

## APPLICATION FOR ADMISSION

## **Recommendation Form**

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	-	SECT	

CITY

<b>To be completed by the student:</b> Please complete this portion of this form and give it to a director, teacher, or other qualified person. The individual should comment on your work and potential as an actor, singer, or dancer. This Recommendation Form should be returned to AMDA <b>prior</b> to your audition.					
Name of Applicant:	Telephone:				
Address:					
STREET ADDRESS 1	STREET ADDRESS 2 (APARTMENT #, SUITE, ETC.				

STATE

ZIP/POSTAL CODE

COUNTRY

☐ I am applying to the Los Angeles Campus

## ■ RECOMMENDER SECTION

**To be completed by the recommender:** The Admissions Committee seriously considers the personal qualifications of each applicant and appreciates your thoughtful responses to the following items. Please evaluate the applicant as carefully as possible, noting both strengths and weaknesses.

This recommendation is intended solely for use in the admissions process and will not be part of the student's permanent file.

١.	Please state your relationship to the applicant:
	How long have you known the applicant?:
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2. Please place check marks at the points that represent your evaluation of the applicant in comparison with other students.

	Below Average	Average	Above Average	Outstanding (Top 5% of this year)	One of the top few I have encountered in my career
Energy and Initiative					
Responsibility					
Social Maturity					
Self-confidence					
Dependability					
Classroom Participation					
Disciplined Work Habits					



## **Recommendation Form**

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- 4. Successful students must be able to work both independently and with peers in a professional manner and must possess physical stamina, academic drive, and personal discipline. Are there any factors that might interfere with applicant's ability to excel in such an environment? Please explain.
- 5. I recommend this applicant for admission to AMDA based on:

	Not Recommended	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically
Aptitude for a career in the performing arts					
Ability to succeed in a school environment					
Overall recommendation					

Print Name:				
Signature:	Date:			
Name of Institution:	Title:			
Address:				
STREET ADDRESS 1			STREET ADDRESS 2 (APARTMENT #, SUITE, ETC.)	)
CITY	CTATE	ZID/DOSTAL CODE	COLINITRY	

Please submit document either electronically to <a href="mailto:docs@amda.edu">docs@amda.edu</a> or by mailing to the address below:

AMDA RECORDS DEPARTMENT

211 West 61st Street New York, NY 10023 Fax (646) 609-8811