



DANCE CO.

# Application Form

## Ingredients Trainee Program

Please fill out application form completely and accurately. TYPE or PRINT CLEARLY.  
Your application must include a headshot, resume (optional), and \$25.00 application fee.

Name \_\_\_\_\_ Nickname \_\_\_\_\_

Age as of September 2018 \_\_\_\_\_ Date of Birth \_\_\_\_\_

Gender: Male Female Height \_\_\_\_\_ Weight \_\_\_\_\_

Names of Parents/Guardians \_\_\_\_\_

Phone: Home (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Church Affiliation \_\_\_\_\_

How long have your attended this church? \_\_\_\_\_

**DANCE TRAINING:**

Please list your previous and current Dance Training. Include the style of dance (ballet, modern, etc.), studio/school, teacher's name, and number of years. Use an extra piece of paper if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you attended Dance Revolution regional or national in the past?

\_\_\_\_\_ yes \_\_\_\_\_ no

If yes, please list number of years attended and location(s):

\_\_\_\_\_

**EDUCATION:**

Please circle the highest level of education that you have completed:

Some High School      High School Graduate      Some College      College Graduate

**EMPLOYMENT HISTORY:**

List the most recent first.

Company \_\_\_\_\_ Manager \_\_\_\_\_

Position \_\_\_\_\_ Dates Held \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ Manager \_\_\_\_\_

Position \_\_\_\_\_ Dates Held \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ Manager \_\_\_\_\_

Position \_\_\_\_\_ Dates Held \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**REFERENCES:**

List your three references.

Please provide a copy of the recommendation form for each of your three references.

Pastor/Spiritual Leader \_\_\_\_\_

Parent \_\_\_\_\_

Friend \_\_\_\_\_

If accepted as an Ingredients Trainee, who will be responsible for your tuition?  
\_\_\_\_\_

If accepted as an Ingredients Trainee, how will you be supported during your time as a trainee?  
\_\_\_\_\_

## QUESTIONS:

Please answer the following questions briefly on a separate typewritten page. Write at least one paragraph to answer each question, answering them to the best of your ability.

1. Tell us how and when you became a Christian and about your personal growth in Christ.
2. Describe your current walk with the Lord, including how your faith is growing, the spiritual influences in your life, your quiet times, church involvement and outreach activities that you have participated in.
3. Who, besides the Lord, has made the biggest impact in your life? Please explain.
4. List and explain three of your strengths and three of your weaknesses.
5. Explain how and why God is calling you to become a Trainee with Ingredients. Include how you believe Ingredients can help you reach your goals and how you can be an asset to the ministry.
6. Do you have a physical handicap, disability, or disease that might affect your ability to fully function as an intern? Yes    No  
If so, please explain:
7. Do you have any chronic illnesses?    Yes    No  
If so, please explain:
8. Are you presently under medication prescribed by a doctor?    Yes    No  
If so, please explain:

*I understand that trainees are expected to maintain the highest standards of conduct at all times. As a participant in the Ingredients Trainee Program, I will be willing to adhere to the guidelines and rules of the program.*

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Before mailing, make sure you have everything you need to apply:

- Completed Application
- \$25 Application Fee
- Headshot
- Resume (Optional)
- Three Recommendations:
  - Pastor/Spiritual Leader
  - Parent
  - Friend

Mail Application to:

Ingredients Trainee Program  
Dance Revolution  
2100 Greenbriar Dr., Suite #150  
Southlake, Texas 76092

*If you have any questions, call 817-251-9898 or [dancerevolutionmw@gmail.com](mailto:dancerevolutionmw@gmail.com)*