

Write On Application

1) Basic Information

Full Name _____

Home Address _____

Phone Number _____ E-mail _____

Parent/Guardian Name _____

School _____

Please circle grade level: 9th 10th 11th 12th

2) Applicant Questions (If needed, you may use a separate sheet)

What interests you about playwriting and/or making theater?

Why did you choose to submit to Write On?

How did you find out about this program?

3) Teacher Reference

Please list one reference, preferably an English or Drama teacher, who can recommend your participation in Write On.

Reference Name _____

Reference Phone Number _____ Reference Email _____

4) Submission

Please use a separate sheet of paper to explain your 10-minute play idea in 500 words or less. Just describe the idea. Scripts will not be accepted. Summaries of plays that have already been written will not be accepted.

Please return all application materials to **Aurelia Clunie**, Education Associate for Student Audiences: **Email:** aclunie@hartfordstage.org Subject: WRITE ON; **Fax:** (860) 244-0183; **Mail:** Aurelia Clunie, Hartford Stage Education, 50 Church St., Hartford, CT 06103.

Questions? Email aclunie@hartfordstage.org, visit or <http://www.hartfordstage.org/write-on/>, or call 860-520-7255.