

AUDITION APPLICATION FORM – DANCE AND MUSICAL THEATRE

Make sure that you read every section and that the information you provide is accurate and complete.

Please note: Incomplete application forms will not be considered and entrance to auditions will not be permitted.

AUDITION APPLICATION FEE

- A R1000 non-refundable audition fee is payable by all applicants. Audition and registration cancellations will forfeit this fee.
- Should the applicant not be accepted, R500 of the audition fee will be refunded.
- Should the applicant be accepted into the programme, a registration form will need to be submitted along with a R3 000 registration fee.
- Audition fee payments can be made to:
 Standard Bank
 Menlyn
 Branch No. 012345
 Account No. 012750638
- **Proof of payment for the audition fee must be attached to the completed audition form.**
- Please note: No in person or video audition will be assessed unless proof of payment has been provided.

REQUIRED DOCUMENTATION TO ACCOMPANY THE AUDITION APPLICATION FORM

- A recent ID photo must be attached to the audition application form, in the appropriate box.
- A copy of the applicant's most recent academic/tertiary results must accompany this application form.
- If the applicant has completed Grade 12, a certified copy of the Grade 12 certificate must accompany this application.
- If the applicant is still in the process of completing his/her Grade 12, the applicant must provide his/her most recent Grade 12 marks.
- Proof of payment of the audition fee must accompany this application.

AUDITION APPLICATION FORM SUBMISSIONS

- Forms must be emailed to sandyd@oakfieldscollege.co.za. Please make sure to include all documentation in **one single document and not as separate attachments**

Video auditions are only permitted for auditionees that are in another province.

THE VIDEO SUBMISSION MUST BE SUBMITTED AS BELOW:

- YouTube (upload your video and send us the link. THIS IS THE PREFERRED METHOD. Please ensure you have loaded the video as PUBLIC or UNLISTED. To do this go to your video manager under the drop-down menu and change the privacy settings for the video.)
- Shareable via WeTransfer with the link sent to info@oakfieldscollege.co.za and sandyd@oakfieldscollege.co.za. Please ensure to label the files correctly as follows: Name Surname + Audition + Section (e.g.: Sally Brown Audition Singing)
- Shareable via Dropbox with the link sent to sandyd@oakfieldscollege.co.za. Please ensure to label the files correctly as follows: Name Surname + Audition + Section (e.g.: Sally Brown Audition Singing)

Once the panel has reviewed the audition video, we may set a time to conduct a zoom interview if further info is required, after which you will receive an email, informing you of the outcome of the audition.

AUDITION REQUIREMENTS AND PROCEDURE

- A certain amount of preparation is required for the dance/musical theatre audition. Please ensure that you are adequately prepared and have received the document outlining the requirements. (Remember, your level of preparation will give an indication of your commitment and work ethic).
- Please adhere to the audition dress code.

Applicants will be notified of the audition outcome within 4 weeks after the audition. We kindly ask that you refrain from contacting Oakfields College to request the results of the audition before official notification of the audition outcome is released.

Please note under NO circumstances will audition results/outcomes be given to any third party.

CAMPUS: PRETORIA

For office use only

Accepted

Date

Section 1: Identification

NAME AND SURNAME			
AGE			
HAIR COLOUR			
EYE COLOUR			
HEIGHT			
WEIGHT			

Insert ID picture here

Section 2: Audition Date & Time (Please select your preferred audition option by marking with an X at the appropriate block.)

Date of in person audition submission

<input type="text"/>	<input type="text"/>	<input type="text"/>	2025/6
(time)	(day)	(month)	(year)

Video audition submitted via:

YouTube WeTransfer Dropbox

For Office Use Only

DANCING

Yes

Maybe

No

SINGING

Yes

Maybe

No

ACTING

Yes

Maybe

No

INTERVIEW

Yes

Maybe

No

COMMENTS

Section 3: Personal Details

STUDENT FIRST NAME					MR		MRS		MS	
SURNAME										
PREFERRED NAME										
DATE OF BIRTH	day	month	year	GENDER	Male		Female			
ID NUMBER										
POSTAL HOME ADDRESS										
					POSTAL CODE					
PHYSICAL ADDRESS										
					POSTAL CODE					
HOME TEL NUMBER										
CELL NUMBER										
E-MAIL ADDRESS										

Section 4: Education

Secondary											
Have you completed your final Grade 12 exams?					YES		NO				
NAME OF SCHOOL where Grade 12 is being/has been completed											
If you are currently busy with Grade 12, please put your subjects and your term 1, 2, 3 results											
Tertiary (if applicable)											
Current	NAME OF UNIVERSITY / INSTITUTION										
	DEPARTMENT										
	COURSE										
	YEAR OF COMMENCEMENT										
Previous	NAME OF UNIVERSITY / INSTITUTION										
	DEPARTMENT										
	COURSE										
	YEAR OF COMMENCEMENT										
Have you repeated any year of study during your current or previous tertiary study? If "yes" state year and reason											

Please note:

* A copy of the applicant's most recent academic / tertiary results must accompany this application form

* If the applicant has completed Grade 12, a certified copy of the Grade 12 Certificate must accompany this application

Section 5: Application Details (Please mark with an X where applicable)

For which year of study do you hope to enroll?					
1 st Year		2 nd Year		3 rd Year	
Which discipline is your STRONGEST?					
SINGING		DANCING		ACTING	
Have you / will you be applying for a bursary?			Yes		No
If 'Yes' state with which company/ies					
Will you be applying for a student loan?			Yes		No
Do you have accommodation in Pretoria?			Yes		No
If 'Yes' state which area you will be residing in					
Do you have your own transport?			Yes		No
Do you have any previous injuries?			Yes		No
If 'Yes' please provide details					
Are you on any chronic medication?			Yes		No
If 'Yes' please provide details					

Section 6: Previous Training *Not a prerequisite*

Section 7: Contact Details of Parent / Guardian / Person Responsible for Account

NAME	SURNAME	
RELATIONSHIP TO APPLICANT		
CURRENTLY EMPLOYED YES/NO	NAME OF EMPLOYER:	
	EMPLOYER CONTACT NUMBER:	
PHYSICAL RESIDENTIAL ADDRESS		
		POSTAL CODE
CELL NUMBER		
WHATS APP NUMBER IF DIFFERENT	LANDLINE (WORK)	
E-MAIL ADDRESS		

Section 8: Banking details of Parent / Guardian / Person Responsible for Account

(Should the application not be accepted, R500 will be refunded to you. Please provide banking details of account into which any refund should be deposited.)

ACCOUNT/BENEFICIARY NAME			
BANK NAME		ACCOUNT NUMBER	
BRANCH		BRANCH CODE	

Section 9: Marketing

WHERE DID YOU HEAR ABOUT US?			
WHAT MADE YOU CHOOOSE OAKFIELDS COLLEGE?			

Section 9: Declaration

1. I hereby, declare that **ALL** the information provided in this application form is complete and correct.
2. I hereby, acknowledge that if **ANY** of the information provided in this application form is found to be incomplete and / or incorrect, my application may be disqualified.
3. I hereby, acknowledge that while all information contained herein will as far as possible remain confidential; OAKFIELDS COLLEGE will, at their discretion, forward this information to potential sponsors / benefactors if necessary.
4. I hereby acknowledge that acceptance into the OAKFIELDS COLLEGE Dance or Musical Theatre course is not guaranteed and will depend on the outcome of the audition.
5. I understand that failure to adhere to any of the audition requirements/procedures may result in immediate disqualification from the audition and that the audition fee is non-refundable.
6. I accept that the audition panel's decision is **final**.
7. I understand that OAKFIELDS COLLEGE will notify me of the audition results via email (usually within four weeks) **We kindly ask that you refrain from contacting OAKFIELDS COLLEGE to request the results of the audition before official notification of the audition outcome is released.**

Full Name of Applicant

Full Name of Parent / Guardian

Signature of Applicant

Signature of Parent / Guardian

DATE _____