



Drama Academy - Palestine

Student application Form
Admission for Drama Academy, To Obtain a Bachelors Degree

Date :/.....

- 1- Full Name :First Name :
- 2- Place of Birth :
- 3- Date of Birth :
- 4- Gender :
- 5- Material Status :
- 6- Nationality : Country of Citizenship:
- 7- Current Address :
- 8- Permanent Address :
Street/ Town/ Governorate/ Country
- 9- P.O Box :
- 10- Telephone No:
Mobile No :
- 11- Email Address :

This application must be completed in clear black ink in both Arabic and English.
Application and all attachments must be submitted by _____ .

Application must be submitted in person to:

Drama Academy
Al-Kasaba Theatre and Cinematheque
Ramallah –hospital street
Tel : 02 - 2965292/3
Fax : 02 – 2965294
E-mail : info@alkasaba.org
P.O. Box 2254

Require Attachments

Two person photographs
Photocopy of ID or passport
Official high school transcripts
Recommendation letters (optional)
Resume (optional)
Samples of student art work D.V.D

12 – High School Education:

Name	Address	Year

13- Previous Universities or Academies:

Name	Address	Year

Write about your artistic background:

Write your reasons for enrollment in the International Academy of Art Palestine:

List your activities, special interests, and skills:

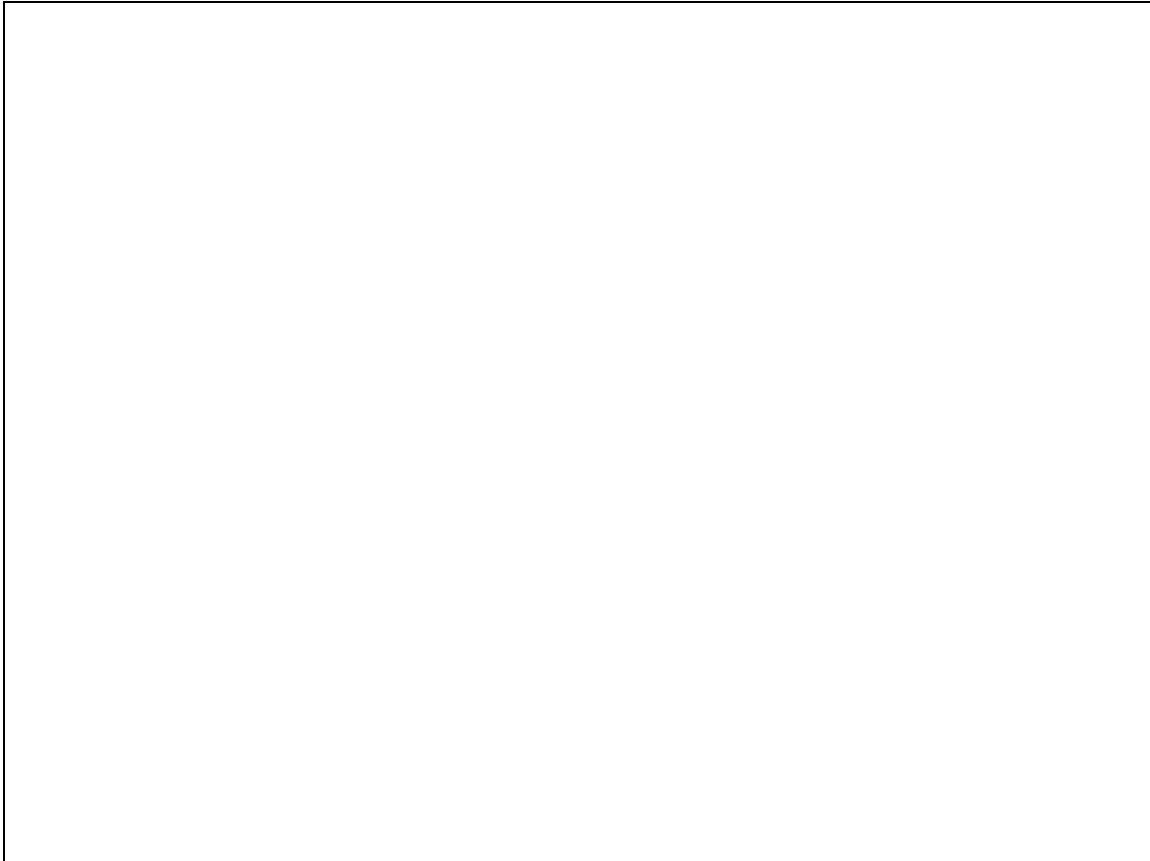
Application can be obtained at Drama Academy – Al Kasaba theatre & Cinematheque, Ramallah – Hospital Street, or by downloading the application from the academy website www.alkasaba.org.

All information and documents attached to this application are for the exclusive use of drama academy; please provide copies and not originals since they will not be returned to the applicant.

Signature:
Date:

This section is for the use of the Academy admissions staff:

No:



Drama Academy Project

