

APPLICATION FORM ACTING in ENGLISH

2024/2025 Admissions

Last Name:
First Name:
Date of Birth:
Address:
Tel:
Email:
Your professional status:
Acting program:
 □ ACTING in ENGLISH – The professional training program □ ACTING in ENGLISH – 1 Class □ ACTING in ENGLISH – 2 or 3 Classes
Schedule preferences:
☐ MORNING ☐ AFTERNOON ☐ EVENING AUGUST
☐ EVENING/NIGHT ☐ Other:

Please answer simply and sincerely, avoid ready-made formulas.
01- Have you ever attended classes for Theater, Cinema, Acting or other types of training? If you did, in which school(s)? With which teacher(s)?
02- What kind of training are you looking for now?
03- Why did you choose Method Acting Center as a potential future school?
04- Are you familiar with the Method? If so, what do you expect from this particular technique
05- Are you training to become a professional? If you are, why ? If you're not, why ?

06 - In your opinion, what is it like to be an actor in France?
07- What are your sources of inspiration? Are you passionate? About what, and/or who?
08- How much time per week do you plan to devote to the course(s)?
09 - In your opinion, what are your assets, qualities for being an actor ?
10- And on the contrary, what are your weaknesses which you will have to work on, in order to achieve this ?

11- Do you think that you will pursue the acting program for the expected 3 or more years? Do you think that you will pursue the Scenario/Directing program for the expected 2 years? Yes or no, and why?
12- What are your ambitions/professional projects as an actor, screenwriter or director?
BONUS QUESTION – If you had to describe yourself in a quote, a catchphrase, or tagline, what would it be ?