CENTER THEATRE GROUP OBSERVERSHIP PROGRAM APPLICATION

The Center Theatre Group Observership Program is a paid opportunity for diverse earlycareertheatre artists to sit in on a professional rehearsal process.

PLEASE NOTE: Applications received outside of Center Theatre Group Observership deadlines or without all required elements will not be considered. All Observership applications require **2 documents** in addition to this one: a Word or PDF **resume** and a Word or PDF document with the answers to the **Observership Questions** for the upcoming semester. For full instructions for each available Observership, please visit CTGLA.org/Observerships.

APPLICANT INFORMATION

Full Name

Observership Cycle _____

REQUIREMENTS

We will not be able to consider applicants who cannot commit to the criteria below. **Please closely review the Observership Questions** at <u>CTGLA.org/Observerships</u> and the time commitment required. If you have questions, please email us at Observerships@CTGLA.org before applying. Note that your answers to these questions cannot be changed if you receive consideration for an Observership, and providing inaccurate or misleading information below will remove you from consideration.

I understand the Observership begins on _____(date) and ends on _____(date).

(please initial) I have reviewed the Observership schedule for this cycle and am available for all dates.

(please initial) I have reliable transportation to and from the Observership sites, which include The Music Center in Downtown Los Angeles and the Kirk Douglas Theatre in Culver City.

(please initial) | believe | fulfil the Diversity Requirement and | have addressed this in my answers to the Observership Questions.

(please initial) I will be 18 years of age or older on the first day of the Observership.

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ELIGIBILITY

All applicants must be able to select A, B, or C. Anyone who does not fit one of these requirements cannot be considered.

OPTION A: I am a currently enrolled full- or part-time student at a two-year or four-year college or university or technical trade school, pursuing an undergraduate or graduate degree or certification.

OPTION B: I have graduated from an undergraduate program within 12 months of the application due date.

If you selected A or B, please complete the school information below:

School Name:
Enrollment Status:
Part-Time Full-Time
Year in School:
First Year
Sophomore
Junior
Senior
5 th Year Senior
Masters Student (MFA/MA or PhD)
If graduated, please enter graduation month and year:

OPTION C: I have pursued an alternate path to formal education (examples: military veterans, students at technical or trade schools, people who went directly into the workforce after high school). I have no paid or professional theatre experience.

If you selected Option C, please elaborate on your education and/or career path:

Have you applied to a job, Internship, or Apprenticeship at Center Theatre Group before?

	Yes		No
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If so, when?_____For what position(s)? _____

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INSTRUCTIONS FOR ANSWERING THE FOLLOWING QUESTION REGARDING YOUR CRIMINAL RECORD HISTORY:

All applicants: Do not respond "yes" to the following question for arrests or detentions that did not result in conviction; referrals to, and participation in, any pretrial or post-trial diversion program; marijuana-related convictions more than two years old; convictions for which the record has been judicially ordered sealed, expunged, or statutorily eradicated; convictions that occurred more than ten (10) years ago; misdemeanor convictions for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed; and first convictions for misdemeanors of drunkenness, simple assault, speeding, minor traffic violations, or disturbances of the peace or misdemeanor convictions where five (5) or more years have elapsed between the application date and the date of conviction or completion of incarceration, whichever is later.

Have you been convicted of a felony, or a misdemeanor involving any violent act, use or possession of a weapon or act of dishonesty for which the record has not been sealed or expunged?



If yes, what was the offense?

Date and place of conviction _____

NOTE: Conviction record will not necessarily be a bar to participation. Factors such as age at the time of the offense, type of offense and relevance to the Observership for which you are applying, seriousness and nature of offense and rehabilitation will all be taken into account.

TELL US MORE ABOUT YOU: DEMOGRAPHIC INFORMATION

Center Theatre Group collects demographic information to help us learn more about who is participating in our programs. How each of us identifies as an individual is a deeply personal matter, and our organization strives to be highly respectful in seeking this data. We are currently using the standard categories for race/ethnicity indicated on the United States Census, but we recognize that these categories are limited, and in some cases they are racially and politically charged. Please tell us how you identify in the way that is most comfortable for you. We invite you to check one or more boxes and/or feel free to provide any specific or additional information in the space provided. Please note these questions are optional.

RACE / ETHNICITY	GENDER
Asian	Genderfluid
Black or African American	Man Man
Latina/o or Latinx	Nonbinary
🗌 Indigenous Peoples, American Indian, or Alaska Native	🗌 Woman
Middle Eastern or North African	Decline to State
Native Hawaiian or Other Pacific Islander	My gender is:
White	
Decline to State	

My race/ethnicity is:

HOW DID YOU HEAR ABOUT THE CTG OBSERVERSHIP PROGRAM? (PLEASE CHECK ALL THAT APPLY)

- From a Professor
- College/University Email
- Campus Presentation
- Google or online search
- School career website
- Other (please specify)

CENTER Center Theatre Group

AGREEMENT OF APPLICANT CERTIFICATION, AUTHORIZATIONS, AND UNDERSTANDING OF OBSERVERSHIP RELATIONSHIP

_____ (please initial) I certify that the above information is true and correct and I have not withheld any information that might adversely affect my chances for an Observership and that my answers are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application.

(please initial) I understand that the Observer selection process will be terminated, or in the event of my Observership at Center Theatre Group, I shall be subject to dismissal, if any information that I have given in this application, in any resume or interview, or any part of the selection process is false or misleading, or if I have failed to give any information herein requested, or if I have withheld relevant information, regardless of the time elapsed after discovery.

(please initial) I authorize Center Theatre Group to inquire into my educational, professional, and past history references as needed to research my qualifications for this Observership. I hereby give my consent to any former employers or educational institutions to provide employment-related or education-related information about me to Center Theatre Group and will hold Center Theatre Group, my former employers, and former educational institutions harmless from any claim made on the basis that such information about me was provided or that any Observership decision was made on the basis of such information.

(please initial) I understand that nothing in this Observership application, the granting of an interview, or my subsequent Observership with Center Theatre Group is intended to create a contract between myself and Center Theatre Group. I understand that if selected, I would not be hired by Center Theatre Group in any capacity and would not be considered either an employee or a contractor; rather, I would be participating in a short-term educational program.

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Applicant mailing address (during Observership period)				
	-mail address			
The information contained in this application, including all attachments, is true and accurate to the best of my knowledge.I certify that I meet all eligibility requirements for this Observership.				
Typed/Printed Name of Applicant	Date			
Signature of Applicant (Electronic Signature Accepted)				
PLEASE RETURN THIS FORM along with all supplementary materials by the application deadline to Observerships@CTGLA.org	QUESTIONS? Email Observerships@CTGLA.org			