

THE UNIVERSITY OF KENTUCKY DEPARTMENT OF THEATRE ARTS

DIRECTING STUDIO

-Application-

Name _____ S.S.# _____

Address _____ Phone# _____

Class Year _____ Major _____ GPA in Major _____

Last Directing Class TA _____ Present Directing Class TA _____

Title of Project/Script _____ # of
Characters _____

Playwright _____ Publisher _____

Desired Production Space _____ Desired Production Dates _____

On a separate piece of paper, please answer the following questions.
(Please Type or Print Clearly!)

1. Discuss the Nature of the project.
2. What objectives do you have for the project? (What do you hope to learn and how do you plan to go about securing that learning?)
3. What essential items do you think you will need to undertake the directing of this piece?
4. How would you propose to achieve your goals without those items? (Problem Solve.)
5. Why should you be able to direct in the studio season? What unique insight/idea do you have to offer our theatre community?

I have thoroughly read Part I of the Directing Studio Modus Operandi and if approved, I intend to follow and abide by the procedures set forth within it.

Student 's Signature _____ Date _____

Artistic /Academic Advisor 's Signature _____ Date _____

Directing Studio Advisor 's Signature _____ Date _____

Submitted for Faculty Review _____ Date _____