

LONG ISLAND HIGH SCHOOL for the ARTS

Art ~ Dance ~ Drama ~ Music ~ Musical Theatre ~ Playwriting ~ Theatre Technology

Nassau BOCES Long Island High School for the Arts

239 Cold Spring Road, Syosset, New York 11791, (516) 622-5678

www.lihsarts.org

STUDENT QUESTIONNAIRE (Please print)

~ VOCAL MUSIC ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Street Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Do you take private lessons? Yes No Number of years of study _____

Vocal Range: (circle) Soprano Alto Tenor Baritone

Vocal Coach: In School _____ Out of School _____

Languages you sing in other than English _____

Have you taken part in any musical programs? Yes No

Place: _____

Please list areas of music which you have studied (ex: Theory, 2 years)

Are you a member of any vocal organizations?

In school? Yes No Out of School? Yes No

Please list any other related experience you have had in the area of music (Ex: awards, summer programs, competitions, special programs, internships, etc.)

After graduation, are you interested in pursuing music at a college or conservatory Yes No

To be completed by home school district Guidance Counselor

This student is an applicant for: _____ Full Day _____ Half Day _____ To Be Determined

Has this student ever been classified by your school district CSE? _____ Yes _____ No

Is this student currently classified by your school district CSE? _____ Yes _____ No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? _____ Yes _____ No

Does this student currently have 504 Accommodations? _____ Yes _____ No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____

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STUDENT QUESTIONNAIRE (Please print)

~ INSTRUMENTAL MUSIC ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Do you take private lessons? Yes No In what instrument _____

Number of years of study _____ Instrument played _____

Music Instructor : In School _____ Out of School _____

Other areas of interest: Conducting Composition Other _____

Have you taken part in any musical programs? Yes No

Place: _____

Please list areas of music which you have studied (ex: Theory, 2 years)

Are you a member of any music organizations?

In school? Yes No Out of School? Yes No

Please list any other related experience you have had in the area of music (Ex: awards, summer programs, competitions, special programs, internships, etc.)

After graduation, are you interested in pursuing music at a college or conservatory Yes No

To be completed by home school district Guidance Counselor

This student is an applicant for: Full Day Half Day To Be Determined

Has this student ever been classified by your school district CSE? Yes No

Is this student currently classified by your school district CSE? Yes No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? Yes No

Does this student currently have 504 Accommodations? Yes No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____

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STUDENT QUESTIONNAIRE (Please print)

~ ART ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Do you take private lessons? ___Yes ___No Years of art study completed _____

Art Instructor : In School _____ Out of School _____

Major area of interest: ___Painting ___Sculpture ___Ceramics ___Drawing Other _____

Please list areas of art which you have studied (ex: Photography, etc.) _____

Do you frequent museums or galleries? ___Yes ___No Please list museums and galleries _____

Has any of your art work ever been displayed? In school? _____ Out of school? _____

Please list any other related experience you have had in the area of art (Ex: awards, summer programs, competitions, special programs, internships, etc.)

After graduation, are you interested in pursuing art at a college or conservatory ___Yes ___No

To be completed by home school district Guidance Counselor

This student is an applicant for: ___Full Day ___Half Day ___To Be Determined

Has this student ever been classified by your school district CSE? ___Yes ___No

Is this student currently classified by your school district CSE? ___Yes ___No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? ___Yes ___No

Does this student currently have 504 Accommodations? ___Yes ___No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____

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STUDENT QUESTIONNAIRE (Please print)

~ DRAMA ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Do you take private lessons? Yes No Areas of study _____

Drama Coach: In School _____ Out of School _____

Major area of interest: (circle) Drama, Comedy, Directing, Film Production, Technical Theatre, Playwriting, Other _____

Have you taken part in any productions ? Yes No

| PRODUCTION | ROLE | WHERE | WHEN |
|------------|------|-------|------|
| | | | |
| | | | |

Please list areas of drama which you have studied (ex: monologue work, scene study, etc.) _____

Please list any other related experience you have had in the area of theatre (Ex: awards, summer programs, competitions, special programs, internships, etc.) _____

After graduation, are you interested in pursuing theatre at a college or conservatory Yes No

To be completed by home school district Guidance Counselor

This student is an applicant for: Full Day Half Day To Be Determined

Has this student ever been classified by your school district CSE? Yes No

Is this student currently classified by your school district CSE? Yes No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? Yes No

Does this student currently have 504 Accommodations? Yes No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____

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STUDENT QUESTIONNAIRE (Please print)

~ THEATRE TECHNOLOGY ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Are you on your district's stage crew ___Yes ___No Number of years _____

In what areas: ___Lighting ___Sound ___Set Construction ___Costume Design Other _____

Teacher/Advisor: In School _____ Out of School _____

Have you taken part in any productions ? ___ Yes ___ No

| PRODUCTION | ROLE | WHERE | WHEN |
|------------|------|-------|------|
| | | | |
| | | | |
| | | | |

Please list areas of theatre which you have studied (ex: direction, etc.) _____

Please list any other related experience you have had in the area of theatre (Ex: awards, summer programs, competitions, special programs, internships, etc.) _____

After graduation, are you interested in pursuing theatre at a college or conservatory ___Yes ___No

To be completed by home school district Guidance Counselor

This student is an applicant for: _____ Full Day _____ Half Day _____ To Be Determined

Has this student ever been classified by your school district CSE? _____ Yes _____ No

Is this student currently classified by your school district CSE? _____ Yes _____ No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? _____ Yes _____ No

Does this student currently have 504 Accommodations? _____ Yes _____ No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____

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STUDENT QUESTIONNAIRE (Please print)

~ PLAYWRITING ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Writing Instructor: In School _____ Out of School _____

Major area of interest in writing: (circle) Poetry, Playwriting, Fiction, Non-Fiction, Film, Other _____

Please list areas of writing which you have studied (ex: poetry, etc.) _____

Please list any other related experience you have had in the area of creative writing (Ex: awards, summer programs, competitions, special programs, internships, etc.)

After graduation, are you interested in pursuing writing at college ___ Yes ___ No

To be completed by home school district Guidance Counselor

This student is an applicant for: _____ Full Day _____ Half Day _____ To Be Determined

Has this student ever been classified by your school district CSE? _____ Yes _____ No

Is this student currently classified by your school district CSE? _____ Yes _____ No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? _____ Yes _____ No

Does this student currently have 504 Accommodations? _____ Yes _____ No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____

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STUDENT QUESTIONNAIRE (Please print)

~ DANCE ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Do you take private lessons? Yes No Number of years of study _____

Years of: Ballet Modern Jazz Number of Classes per Week: Ballet Modern Jazz

Dance Instructor: In School _____ Out of School _____

Have you taken part in any dance presentations Yes No Place: _____

Have you ever sustained an injury? Yes No Describe injury _____

Please list any other related experience you have had in the area of dance (Ex: awards, summer programs, competitions, special programs, internships, etc.)

After graduation, are you interested in pursuing dance at a college or conservatory Yes No

To be completed by home school district Guidance Counselor

This student is an applicant for: Full Day Half Day To Be Determined

Has this student ever been classified by your school district CSE? Yes No

Is this student currently classified by your school district CSE? Yes No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? Yes No

Does this student currently have 504 Accommodations? Yes No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____

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Dear Student:

The Board of Cooperative Educational Services of Nassau County is scheduling auditions for students interested in attending the Long Island High School for the Arts.

The Long Island High School for the Arts is designed for students in grades 9, 10, 11 and 12 who are talented in the arts – art, dance, drama, musical theatre, vocal music, instrumental music, playwriting, film and theatre technology and who wish to continue these studies at a school of higher education and pursue the arts as a profession.

The program is individualized and students receive a specialized academic study of their art form with outstanding professionals through workshops, classroom experiences, small group instruction and ensemble work.

The high school has **full day** and **half day** programs. Some students attend for one half of each school day and the other half return to their high school to complete their other academic courses. Other students may elect, with their school district's approval, to attend the high school for a full day, meeting all the academic requirements for graduation. The option is available to students in grades 9, 10, 11 and 12. Some courses offered to students in each department are:

ART: Advanced Placement Studio Art, Advanced Drawing, Advanced Painting, Anatomy and Design, Art History, Photography, Sculptural Anatomy, Figure Drawing, Portfolio Preparation, Computer Graphics, Film and Animation.

DANCE: Ballet, Modern, Jazz, Dance History, Body Conditioning, Ethnic Dance, Composition and Audition.

DRAMA: Acting Techniques, Theatre History, Improvisation, Movement for Actors, Musical Theatre, Vocal Communication, Theatre Dance Ensemble, Scene Study and Audition.

FILM: Feature-length and Short-form Screenwriting, Creative Writing, Hands-On Film Production Workshops (shooting short films), Documentary Filmmaking, Non-Linear Editing, Film Analysis and Criticism, Acting for Film, Computer Animation & Graphics.

MUSICAL THEATRE: Acting Techniques, Musical Theatre Ensemble, Theatre History, Improvisation, Vocal Communication, Sightsinging, Audition, Theatre Dance Ensemble, Scene Study and Cabaret.

INSTRUMENTAL MUSIC: Literature and Materials of Music (Music Theory, Music History and Eartraining), Advanced Placement Music Theory, Jazz History and Composition, Music Technology, Instrumental Ensembles, Sightsinging, Improvisation, Composition and Audition.

PLAYWRITING: Techniques of Playwriting, Creative Writing, Theatre History, Acting for Playwrights, Directing and Critique of Works in Progress

VOCAL MUSIC: Literature and Materials of Music (Music Theory, Music History and Eartraining), Advanced Placement Music Theory, Sightsinging, Vocal Ensembles in Classical, Jazz and Contemporary Music, Musical Theatre for Vocalists, History of Popular Music, Composition and Audition.

THEATRE TECHNOLOGY: Survey of Technical Theatre, Lighting Design, Sound Design, Computer Graphics, Theatre History, Advanced Drawing, Scenic Design, Costume Design, Stagecraft and Stage Management.

Most students have the opportunity to take electives in other departments. Seniors take additional classes in Audition and College Communications to prepare for college auditions and students in each department participate in Inter Arts Workshops.

If you are interested in auditioning for the Nassau BOCES Long Island High School for the Arts, please complete this questionnaire and return it to your guidance counselor.

Sincerely,
Ava M. Favara, Principal

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STUDENT QUESTIONNAIRE (Please print)

~ MUSICAL THEATRE ~

Student's Name _____

Family Name (if different) _____ School District Name _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of **September 2008** _____

Name of School _____ Guidance Counselor _____

Do you take private lessons? Yes No Areas of study _____

Theatre Coach: In School _____ Out of School _____

Major area of interest: (circle) Drama, Comedy, Directing, Technical Theatre, Playwriting, Film Production, Other _____

Have you taken part in any productions ? Yes No

| PRODUCTION | ROLE | WHERE | WHEN |
|------------|------|-------|------|
| | | | |
| | | | |
| | | | |

Please list areas of musical theatre which you have studied (ex: voice lessons, monologue work, etc) _____

Please list any other related experience you have had in the area of theatre (Ex: awards, summer programs, competitions, special programs, internships, etc.) _____

After graduation, are you interested in pursuing theatre at a college or conservatory Yes No

To be completed by home school district Guidance Counselor

This student is an applicant for: Full Day Half Day To Be Determined

Has this student ever been classified by your school district CSE? Yes No

Is this student currently classified by your school district CSE? Yes No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? Yes No

Does this student currently have 504 Accommodations? Yes No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor's Name (please print) _____

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STUDENT QUESTIONNAIRE (Please print)

~ FILM ~

Student's Name _____

Family Name (if different) _____ District _____

Home Address _____ Town _____ Zip _____

Home Phone _____ Birth Date _____ Grade as of September 2008 _____

Name of School _____ Guidance Counselor _____

Have you taken a film class? ___ Yes ___ No ___ Years of film study completed _____

Major area of interest in Film (i.e.) Directing _____ Writing _____ Camera Work _____

Editing _____ Animation _____ Other _____

Please list areas of film which you have studied (if any) _____

Have you have worked on a student or professional film _____

Please list any other related experience you have had in the area of film or TV (Ex: student film, your own film, summer programs, internships, competitions, TV Studio, etc.)

After graduation, are you interested in pursuing film at college ___ Yes ___ No

To be completed by home school district Guidance Counselor

This student is an applicant for: _____ Full Day _____ Half Day _____ To Be Determined

Has this student ever been classified by your school district CSE? _____ Yes _____ No

Is this student currently classified by your school district CSE? _____ Yes _____ No

(If yes, please attach a copy of current Individual Education Plan)

Has this student ever had 504 Accommodations? _____ Yes _____ No

Does this student currently have 504 Accommodations? _____ Yes _____ No

(If yes, please attach a copy of the current 504 Plan)

Guidance Counselor Signature _____ Telephone _____

Guidance Counselor Name (please print) _____