

# The Tepper Semester Application Checklist

*Please submit the following:*

┌ **The Application.** The application completed in full.

**Study New York Approval Form.** Non-Syracuse University students please submit the approval form to the appropriate person on your home campus who can then complete it and return it to the Tepper Semester office.

**Transcript.** Non-Syracuse University students are asked to have one official transcript of all college work sent to the following email: [tepper@syr.edu](mailto:tepper@syr.edu). Students who have transferred to their present colleges should also request that a transcript from their previous college or colleges be sent to the Tepper Semester program office.

**Two Letters of Recommendation.** Non-Syracuse University students must submit two letters of recommendation from an academic reference.

┌ **Financial Aid Applicants.** All Syracuse University students who apply for the Tepper program will automatically be considered for grants and scholarships funded by the University. No separate application is required. Students will be notified of their award at the time they are accepted into the program. In addition to grants and scholarships, students may apply for loans. Information is available on loan options on the Tepper program website.

**All Non-Syracuse University matriculated students** please contact the financial aid office at their home college regarding availability of funding. Under certain circumstances, students matriculated at other institutions, where the home institution will not provide assistance while a student is enrolled at Syracuse University, the student may receive a federal student loan through the University. If you are in this position, you should contact the Tepper program office for additional information.

┌ **A Non-Refundable Application Fee of \$60.** Make your check or money order payable to Syracuse University.

*Additional Checklist for Design/Tech, Theater Management, Stage Management, Playwriting, Directing, and Casting:*

Please review the following instructions that may pertain to your application.

┌ **Resume** of academic and professional experience and cover letter

**Written Statement.** Non-Syracuse University students are asked to complete a written statement. Please see attached written statement form.

┌ **Internship.**

*(Stage Management Students Only)*

With the guidance of the Tepper Center, students are required to secure a New York City internship by December 15 in preparation for the program. Students may also contact the Tepper Semester program office for further information.

┌ **Portfolio and Production Book Materials.**

*(Stage Management and Design/Tech Students Only)*

Students are required to provide samples of production book materials for stage management students and a portfolio for design/tech students). Syracuse University students will submit all materials in person. Non-Syracuse University students can submit materials in person, through the mail, on disc, or by email.

*Submission Guidelines are posted on the web at:*  
[vpa.syr.edu/tepper](http://vpa.syr.edu/tepper)

Please email applications to: [tepper@syr.edu](mailto:tepper@syr.edu)

Please mail application fees to:

Tepper Semester  
136 Madison Avenue  
2<sup>nd</sup> Floor  
New York, NY 10016

**INSTRUCTIONS:** Please complete this application in full and return it to [tepper@syr.edu](mailto:tepper@syr.edu). It is requested that your application includes the **\$60**

**APPLICATION FEE.** Please send the application fee to the above **mailing address**. Please print in black ink or type.

### PERSONAL INFORMATION

Name: \_\_\_\_\_

Last

First

Middle

Date of birth: \_\_\_\_\_ (use numbers) Sex: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Campus address: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

zip

area code

My campus address can be used until the following date: \_\_\_\_\_

Cell phone: \_\_\_\_\_

area code

Home address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Zip

area code

Father's (or guardian's) name: \_\_\_\_\_

Home telephone: \_\_\_\_\_

area code

Father's (or guardian's) address: \_\_\_\_\_

Business address: \_\_\_\_\_

Business telephone: \_\_\_\_\_

area code

Occupation: \_\_\_\_\_

Email: \_\_\_\_\_

Mother's (or guardian's) name: \_\_\_\_\_

Home telephone: \_\_\_\_\_

area code

Mother's (or guardian's) address: \_\_\_\_\_

Business address: \_\_\_\_\_

Business telephone: \_\_\_\_\_

area code

Occupation: \_\_\_\_\_

Email: \_\_\_\_\_

Once students are admitted to the program, information is also sent to parents. Please indicate which address should be used for:

a. General contact: \_\_\_ Father's \_\_\_ Mother's \_\_\_ Other *Please explain:* \_\_\_\_\_

b. Billing purposes: \_\_\_ Father's \_\_\_ Mother's \_\_\_ Other *Please explain:* \_\_\_\_\_

**PROGRAM INFORMATION**

Program:     Acting     Musical Theater     Directing     Casting     Playwriting  
               Design/Tech.     Stage Management     Theater Management

Date you are applying to study in New York City: Fall/Spring 20 \_\_\_\_\_

*(continued)*

## ACADEMIC INFORMATION

University now attending: \_\_\_\_\_

College or school within your university: \_\_\_\_\_

Major field of study: \_\_\_\_\_ Minor field: \_\_\_\_\_ Dual major: \_\_\_\_\_

Cumulative grade point average: \_\_\_\_\_ Semester grade point average: \_\_\_\_\_

Are you currently a: \_\_\_ freshman \_\_\_ sophomore \_\_\_ junior \_\_\_ senior \_\_\_ graduate \_\_\_ other (*please explain*) \_\_\_\_\_

Year of expected graduation: \_\_\_\_\_

List any other colleges, business or professional schools you attended, including dates, degrees, diplomas, and academic honors received:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list the courses you are currently taking:

Course # Title

Course # Title

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## GENERAL INFORMATION (FOR NON-SU STUDENTS)

List below the person who will submit recommendations on your behalf.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

area code

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

area code

How did you first find out about this program? (*check all applicable*)

\_\_\_ past participant Tepper      \_\_\_ faculty member      \_\_\_ campus newspaper      \_\_\_ internet  
\_\_\_ office      \_\_\_ campus fair      \_\_\_ class presentation      \_\_\_ brochure  
\_\_\_ CSA website/seminar      \_\_\_ other \_\_\_\_\_

If you wish to identify yourself as a member of an ethnic and racial group, please indicate:

\_\_\_1. African-American, not of Hispanic Origin      \_\_\_4. Puerto Rican      \_\_\_6. Hispanic, not of Puerto Rican origin  
\_\_\_2. American Indian/Alaskan Native      \_\_\_5. Mexican      \_\_\_7. White, not of Hispanic origin  
\_\_\_3. Asian/Pacific Islander

## AUTHORIZATION FORM

I hereby authorize the release of information from my student personnel record upon the request of Syracuse University's Tepper Semester in NYC Program.

I certify that the information on this application is correct, and I understand that on becoming a student in this program, I shall be subjected to all rules, regulations, and requirements as to conduct, scholarship, and continuance in Syracuse University. I understand that Syracuse University reserves the right to require the withdrawal of any student on account of unsatisfactory academic work or behavior.

Signature of student: \_\_\_\_\_ Date: \_\_\_\_\_

(continued)

**PERSONAL STATEMENT** (FOR ACTING AND MUSICAL THEATER STUDENTS ONLY)

Please write a brief statement, including any information about yourself that you think would be of interest to the admissions committee in evaluating your application. Have you ever lived or traveled in New York City?

Explain why study in New York City is important to you. How would a semester in New York City complement your academic experience to date?

What are your expectations for personal growth and change through the Tepper Semester in New York City?

## PERSONAL STATEMENT

(FOR DIRECTING, CASTING, DESIGN/TECH, THEATER MANAGEMENT, AND STAGE MANAGEMENT STUDENTS)

Please write a brief statement, including any information about yourself that you think would be of interest to the admissions committee in evaluating your application. Have you ever lived or traveled in New York City?

How can a New York City directing, casting, design/tech, or stage management internship complement your academic experience to date?

How can the New York City Internship help you fulfill career goals or interests you have?

What types of organizations or professional offices would enable you to achieve these goals?

**PERSONAL STATEMENT** (FOR PLAYWRITING STUDENTS ONLY)

Tell us about a playwright whose work has had an impact on you or about a specific play that has been meaningful to you as a playwright.

Tell us about your interest in the Tepper Semester program. How do you hope that living and writing in New York City might inform your work and growth as a writer?

What are your writing goals in the coming years? How can the Tepper Semester program serve them?

Please attach a ten-page sample of your work as a playwright. If you'd like, you may include a paragraph providing context for the sample pages submitted.

## PERSONAL STATEMENT (FOR CASTING STUDENTS ONLY)

Briefly explain your understanding of the role of a casting director on a play, musical, film, or television series.

Briefly describe a specific experience in which the casting of a film or theater project had an effect on you.

Explain which area of casting most intrigues you--theater, film, or television--and why you think this medium is a good match to your talents and skills.

Please write about one or two of your favorite actors (male or female) and which role(s) you think were their most interesting or suitable in terms of casting.



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Please mail application fees to:

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136 Madison Avenue  
2<sup>nd</sup> Floor  
New York, NY 10016

*Please print or type.*

- I. Please have this form completed by your academic adviser or appropriate person at your home school who approves study in New York City. It is important that you understand your school's policy for accepting credits earned for study in New York City **before you leave**.

Student's name: \_\_\_\_\_

Program: \_\_\_\_\_

- II. **TO THE COLLEGE OFFICIAL:** The student named above is applying for a Syracuse University Tepper Semester in NYC. If selected, the student is expected to enroll in a full academic program. We would appreciate you evaluating the student.

1. Is the student in good academic standing?      \_\_\_Yes\_\_\_No

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Has this student been subject to disciplinary action?      \_\_\_Yes\_\_\_No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

3. Will credits earned by the student in this program be applied toward completion of a degree awarded by your institution?

\_\_\_Yes, provided the student passes each course with a grade of Yes, \_\_\_\_\_or better.

\_\_\_on the following condition: \_\_\_\_\_

\_\_\_No

4. Will the student be permitted to transfer credit for courses taken on a Pass/Fail basis, given that a Pass grade from Syracuse University represents a grade of D or higher?      \_\_\_Yes\_\_\_No

5. Have you discussed your institution's policy for accepting credit with the above-named student?      \_\_\_Yes\_\_\_No

6. Has the student shown satisfactory adjustment to college life in general?      \_\_\_Yes\_\_\_No

If no, please explain: \_\_\_\_\_  
\_\_\_\_\_

7. Do you recommend the student?      \_\_\_Yes\_\_\_Yes, with reservations      \_\_\_No

If yes, with reservations, or no, please explain: \_\_\_\_\_  
\_\_\_\_\_

8. For additional comments, please use reverse side of this form:

Name of college official: \_\_\_\_\_

Position: \_\_\_\_\_

Institution: \_\_\_\_\_

Fax: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_  
area code

Email: \_\_\_\_\_

Signature of college official: \_\_\_\_\_

Date: \_\_\_\_\_

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**I. TO THE STUDENT:** Please give this form to a person familiar with your academic work.

For the convenience of your reference, complete the top portion of this form and provide your reference via email to the above **email address:** [tepper@syr.edu](mailto:tepper@syr.edu).

Student's name: \_\_\_\_\_

Program: Tepper Semester: Date: Fall/Spring20 \_\_\_\_\_

I am applying for Tepper Semester in NYC.

Under the provisions of the Family Education Rights and Privacy Act,

I have retained my right of access to this recommendation.

I have waived my right of access to this recommendation.

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**II. TO THE RECOMMENDER:** The student named above is applying for a Syracuse University Tepper Semester program. Students are selected on the basis of academic ability and personal maturity. We would appreciate your frank opinion as to the student's qualifications. Please note that the student has been given the option of waiving or retaining the right of access to this recommendation. We would appreciate your response as soon as possible in order to process the student's application into the program.

1. How long and in what capacity have you known the student?

2. Please assess the quality and level of the student's academic work. List strengths and/or weaknesses, as appropriate.

3. How would you assess this student's ability to adjust easily to new or challenging situations/environments?

4. Please comment on how the student relates to other people such as faculty members and peers.

5. Please make any additional comments you wish about the student's qualifications for a program of study in New York City.

6. In light of the above,

\_\_\_ I strongly recommend this student for the New York City program.

\_\_\_ I recommend this student but have some reservations as noted above.

\_\_\_ I cannot recommend this student for the New York City program.

***Please print or type.***

Name of recommender: \_\_\_\_\_

Position: \_\_\_\_\_

University/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

zip

area code

May we contact you if we have any questions about your recommendation? \_\_\_\_\_

Signature of recommender: \_\_\_\_\_

Date: \_\_\_\_\_

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University/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

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\_\_\_\_\_

Telephone: \_\_\_\_\_

zip

area code

May we contact you if we have any questions about your recommendation? \_\_\_\_\_

Signature of recommender: \_\_\_\_\_

Date: \_\_\_\_\_