****

**BA Performance**

**(for Deaf and Hard of Hearing Actors)**

## Application Form: 2025/26

|  |  |
| --- | --- |
| CONTENTS | **PAGE NUMBER** |
| 1. Personal Details
2. Education Details
3. Your Own Experience
4. Personal Statement
5. References
6. Disability
7. Declaration

  | 3 |
|  |  |
|  |  |
|  |  |
| Reference Forms | 12 |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

****

# BA Performance (for Deaf and HoH actors)

# Application Form

Applications should be made by the **29th of January 2025** for the start of the programme in September 2025. This application can be returned to hello@rcs.ac.uk or by post to Admissions, RCS, 100 Renfrew St, Glasgow, G2 3DB.

If you require assistance in completing this form, please get in touch. The Admissions team can be contacted by email hello@rcs.ac.uk or by using Contact BSL Scotland to speak with our team: <https://contactscotland-bsl.org/contact-us/>)

If you would prefer to use Microsoft Teams or Whatsapp . to video call, please make an appointment to talk to one of the BA Performance team who can sign by emailing hello@rcs.ac.uk.

**Part 1 – Personal Details**

|  |  |
| --- | --- |
| First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(DD MM YY) |
| Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Male: Female: Other: |
| Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Post code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Country of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_What country have you lived in for the past 3 years? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Best way to contact you?E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Video Phone (i.e. FaceTime) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Other (please list) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Part 2 – Education Details**

Please give your education history and detail your learning experience below. Example :

* The school or college you attended
* Any qualifications you have

If you would like to attach a copy of your educational certificates you can do so below or by sending them with your filled in application to hello@rcs.ac.uk

|  |
| --- |
|  |

**Part 3 – Your Own Experience**

Please detail any relevant performance experience (for example: training, public shows, workshops) below:

|  |
| --- |
|  |

|  |
| --- |
|  |
|  |
|  |

**Part 4 – Personal Statement – either video or written**

This is your chance to tell us why you are applying and why you want to be a student at the Conservatoire. You can add why you are interested in the course and what you hope to do after your studies.

We would encourage, where possible, BSL users to submit a video of your personal statement in BSL. The maximum length is 5 minutes for a video clip - there is no minimum length.

If submitting a video, please also upload this to your Acceptd account alongside your monologues.

**Please ensure** that your personal statement complies with your own wishes for privacy and security.

The maximum length, if written, is 4000 characters – there is no minimum length. Please enter your written personal statement in the box below.

|  |
| --- |
|  |

**Part 5 – References**

We need 2 people who can recommend you for this course. They need to fill in a reference form. The reference forms can be found at the end of this document.

The referees should return the forms directly to the Conservatoire. We are happy to receive references in sign language.

Please give details of the referees to whom the reference forms have been submitted.

|  |
| --- |
| Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Part 6 – Disability**

Do you have a disability (please put x in the appropriate box):

|  |  |
| --- | --- |
| Yes (please indicate below) |  |
| No  |  |

|  |  |
| --- | --- |
| Learning Difficulty ie dyslexia, Dyspraxia, AD(H)D |  |
| Autistic Spectrum Disorder |  |
| Long Standing Illness ie cancer, HIV, diabetes, chronic heart disease |  |
| Mental Health Difficulties |  |
| Physical impairment/Mobility Issues |  |
| Deaf/hard of hearing  |  |
| Blind/ Visual Impairment |  |
| A disability not listed above |  |
| Prefer not to disclose this |  |

**Part 7 - Declaration**

I confirm that all information provided by me on this form is correct and I shall inform the Royal Conservatoire of Scotland immediately if I change my mind and decide not to proceed with my application at any time.

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

\*RCS takes your privacy very seriously. You can find the RCS Privacy Notices on the website at: <https://www.rcs.ac.uk/policy/privacy/>.

****

100 Renfrew Street, Glasgow, G2 3DB

Tel: +44 (0) 141 332 4101

**Reference 1**

|  |
| --- |
| Applicant’s Name :Course applied for:Referee Name:Position Held:Email address: |

We would value your opinion on the above applicant’s practical and personal qualities with reference to his/her application for the Programme applied for. It would be helpful if your reference could include information on the following aspects:-

* Suitability of the applicant to undertake the above programme of study.
* Ability, experience and potential.
* Practical skills
* Attitude to work and reliability
* Professional commitment
* Communicative ability

Please return this reference to the Conservatoire at the above address. Alternatively, you can email your reference to references@rcs.ac.uk. We also accepted signed references.

|  |
| --- |
| **Reference 1****Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_** |

****

100 Renfrew Street, Glasgow, G2 3DB

Tel: +44 (0) 141 332 4101

**Reference 2**

|  |
| --- |
| Applicant’s Name :Course applied for:Referee Name:Position Held:Email address: |

We would value your opinion on the above applicant’s practical and personal qualities with reference to his/her application for the Programme applied for. It would be helpful if your reference could include information on the following aspects:-

* Suitability of the applicant to undertake the above programme of study.
* Ability, experience and potential.
* Practical skills
* Attitude to work and reliability
* Professional commitment
* Communicative ability

Please return this reference to the Conservatoire at the above address. Alternatively, you can email your reference to references@rcs.ac.uk. We also accepted signed references.

|  |
| --- |
| **Reference 2****Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_** |