



Spectrum in Motion Internship Application

Spectrum in Motion is a dance theatre ensemble based in Hartford, CT. Founded in 1982, Spectrum is celebrating many years of making dances, raising dancers, and building community.

We are currently seeking several DANCE INTERS for our student / youth programs, Stretching for Life & Instruments of Culture. Under the direction of the Founder / Artistic Director, *Olivia Ilano – Davis*, and Director of Programming, *Thulani Davis*, interns will be required to attend dances classes, master classes, mentor young dancers, provide administrative support, and participate in performances alongside the professional company and students.

Spectrum in Motion Dance Theatre Ensemble's Internship Program is a dance intensive / arts administrative focus giving high school students an introductory hands on experience. This program also provides college students a more expansive integrated work experience for a cultural performing arts non – profit organization.

We seek motivated, energized young adults interested in the performing arts. As an intern, you will have the opportunity to gain the following experience:

Dance Pedagogy

Dance Mentorship

Dance Administration

School Year & Summer Internship Opportunities

Performing with a Professional Modern Dance Company



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To be an intern of Spectrum in Motion's Instruments of Culture, you must meet the following requirements:

- Must be at least 16 years old, by start date of internship for high school students.
- College Students MUST submit a resume and two names of references.
- Audition and attend interview (Rolling Basis)
- Must have a min of a 2.8 GPA
- Adhere to the dress code
- Must be available for performances and field trips during internship (evening & weekend events)

School Year Requirements:

- Must be available for a minimum of two days per week

Summer Requirements:

- Must be available for the ENTIRE duration of internship
- STIPEND OPPORTUNITIES

All applications are accepted on a rolling basis. To be considered for each term, please acknowledge the following acceptance dates.

FALL: June - August
WINTER: September - November
SPRING: December - February
SUMMER: March - May

Please mail applications to the following address or drop applications to your school/department's main office.

Spectrum in Motion

City Arts on Pearl, 233 Pearl Street #22, Hartford, CT 06103

OR

For additional information please contact:

Thulani Davis: Director of Programming

(413)-219-5537

tdavis.spectruminmotion@gmail.com or spectruminmtion@gmail.com



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Contact Information:

First Name: _____	Applying for (Please Circle): FA / WI / SP / SM / YR	
Last Name: _____	Year: 20_____	
Date of Birth: ___/___/___		
Address: _____		
City: _____	State: _____	Zip Code: _____
Best Reached (Please Circle): Home / Mobile		
Home Phone: _____	Mobile Phone: _____	
Email Address: _____		
School (Currently Attending): _____		
Grade: _____	GPA: _____	
Major (If Applicable): _____	Expected Date of Graduation: ___/___/___	

Emergency Contact Information:

Name: _____		
Relation to Applicant: _____		
Address (If different than above): _____		
City: _____	State: _____	Zip Code: _____
Best Reached (Please Circle): Home / Mobile		
Home Phone: _____	Mobile Phone: _____	
Email Address: _____		



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Internship Positions:

Position Applying for: <input type="radio"/> Dance Mentoring Intern _____ Student Intern (HS Students) _____ Jr. Faculty (College) <input type="radio"/> Dance Administrative Assistant (College Only) <input type="radio"/> Instruments of Culture Summer Internship	
Are you applying through a Partnership Program? (Please Circle): Yes / No <input type="radio"/> Blue Hills Civic Association <input type="radio"/> Greater Hartford Academy of the Arts <input type="radio"/> University of Hartford Dance Department <input type="radio"/> Other: _____	
Were you referred to us? (Please Circle): Yes / No <input type="radio"/> School: Teacher, Counselor, Administrator, ETC <input type="radio"/> Mentor (Non – School Setting) <input type="radio"/> Friend / Other	Referral Contact Info: Number: (_____) _____
Name of Referral: _____ Email: _____	
List 2 Referrals: (College Students Required)	
Name of Referral: _____	Name of Referral: _____
Number: (_____) _____	Number: (_____) _____
Email: _____	Email: _____

Availability Hours:

Please provide your available hours:

School Year Hours:

Tuesday	Wednesday	Thursday	Saturday
<input type="radio"/> 3 – 7 <input type="radio"/> 4 – 8	<input type="radio"/> 3 – 7 <input type="radio"/> 4 – 8	<input type="radio"/> 3 – 7 <input type="radio"/> 4 – 8	<input type="radio"/> 10:30 – 3:30 <input type="radio"/> 12 – 5
4 Hours	4 Hours	4 Hours	5 Hours

Summer Hours: Blue Hills ONLY

Monday	Tuesday	Wednesday	Thursday	Friday
<input type="radio"/> 8 – 12:30 <input type="radio"/> 12 – 4:30	<input type="radio"/> 8 – 12:30 <input type="radio"/> 12 – 4:30	<input type="radio"/> 8 – 12:30 <input type="radio"/> 12 – 4:30	<input type="radio"/> 8 – 12:30 <input type="radio"/> 12 – 4:30	<input type="radio"/> 8 – 12:30 <input type="radio"/> 12 – 4:30
4.5 Hours	4.5 Hours	4.5 Hours	4.5 Hours	4.5 Hours



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DRESS CODE:

Hair pulled back and off the neck at all times

NO Jeans: Tops or bottoms at all times; **Only** allowed on field trip days if appropriate

NO jewelry: Earrings, necklaces, bracelets, rings, etc; **Only** small studs or gauges allowed

NO Socks during any dance class

NO nail polish (clear allowed) during performance

NO gum chewing

Women:

Tops: Leotards (preferred) or form fitting shirts with full coverage sports bras;

Minimal patterns on any over layering top

Bottoms: Neutral and or solid colored leggings or workout pants

Men:

Tops: Minimal patterns on (form) fitting tank tops or t-shirts

Bottoms: Neutral and or solid colored exercise pants or shorts (**No** pockets);

Athletic Support preferred (athletic shorts, jock strap, dance belt, etc)

Performance:

Tops: Black leotard (preferred for women) or black sports bra and black tank top (**No** spaghetti strap)

Bottoms: Black jazz pants or leggings

Athletic support required for men

We recommend you bring a water bottle to replenish throughout the day.

Snacks and small meals are offered.

By signing your name, you understand what your requirements are as an intern for Spectrum in Motion Dance Theatre Ensemble.

Print Name: _____

Signature: _____

Date: ____/____/____



Spectrum in Motion Internship Application

Internship Questionnaire Supplement: High School Students

A. Please attach a copy of your Resume

B. Please write a short essay (500-1000 words) answering one of the following questions:

1. What do you enjoy about dance/performing arts and how has it enriched your life?
2. What would you consider the three important qualities of a good mentor to be? Describe your person who has been an example to you? How did he/she impact you?

C. Please Answer the following questions.

1. What previous experience do you have in dance and working with children?
2. What is your favorite children's book and why?
3. What is your favorite subject in school?
4. How did you hear about us?



Spectrum in Motion Internship Application

Internship Questionnaire Supplement: College Students

A. Please attach a copy of your Resume

B. Please provide a recent essay from any of your academic classes. Min of 2 - 3 pages in length.

OR

Please write a short essay (500-1000 words) answering one of the following questions:

1. What do you enjoy about dance/performing arts and how has it enriched your life?
2. What would you consider the three important qualities of a good mentor to be? Describe your person who has been an example to you? How did he/she impact you?

C. Please Answer the following questions.

What is your favorite children's book and why?

Why did you choose your major?

How did you hear about us?