



## Certificate in Foundation Sound and Music Information Record

Name of Applicant: ..... Date: .....

Address: .....

..... E-Mail: .....

Telephone..... Mobile: .....

What is the best time to contact you by telephone:.....

### ***AMBITIONS AND DIRECTIONS***

(a) What sort of work would you like to do after completing this course?  
.....

(b) What is your main area of interest, (please circle one)

Contemporary  
Music performance

Live Sound &  
Event Production

Audio Engineering &  
Music Production

### **MUSICAL EXPERIENCE**

(a) Have you ever performed as an instrumentalist? .....  
If yes, what instrument/s and how long have you been playing?  
.....

(b) Have you ever sung or performed as a vocalist?.....

(c) How long have you been singing? .....

(d) How much practice do you do each week? .....

(e) What method have you used to learn, eg. Individual lessons, tapes, books, video, friends?  
.....

(f) Do you or have you played in a band?.....

(g) If yes, detail your most recent band experience (name of band/style of music and dates).

Year	Where	Type of Gigs	Style of Music	Your Instrument

### **SOUND EXPERIENCE**

1 Please state any past audio engineering, lighting or event management experiences that you have had. (e.g: school musicals, equipment at home, etc)

.....

.....

2 Please list your previous computer experience and the software packages that you have used.

.....

3 Do you have your own: 

PC		Laptop	
----	--	--------	--

4 Please indicate how comfortable you are with working in a group environment.

Very comfortable      2                      3                      4                      Not comfortable at all

5 Are you comfortable doing the following: (please tick the boxes)

Transferring audio from format to format		Searching on the Internet	
Programming a video machine to record at a certain time		Using a Library Card System to Search Information	
Operating a computer			

## **EDUCATIONAL BACKGROUND**

5th Form Year 11		6th Form Year 12		7th Form Year 13		Tertiary	
Subject	Grade	Subject	Grade	Subject	Grade	Subject	Grade

### **Learning**

- |  |                  |                 |                      |
|--|------------------|-----------------|----------------------|
| (a) How do you consider that you learn from books? | <b>Easily</b>    | <b>Average</b>  | <b>Slowly</b>        |
| (b) How do you cope with test situations?          | <b>Relaxed</b>   | <b>Average</b>  | <b>Tense</b>         |
| (c) How well do you read music?                    | <b>Well</b>      | <b>Slowly</b>   | <b>Barely at all</b> |
| (d) How do you learn best?                         | <b>Listening</b> | <b>Visually</b> | <b>Actively</b>      |

## **PERSONAL**

(a) Do you have any known medical condition that could affect your ability to complete the course?

Yes		No	
-----	--	----	--

If yes, please describe

.....  
.....

(b) Do you have any known mental health issues that could affect your ability to complete the course?

Yes		No	
-----	--	----	--

If yes, please describe

.....  
.....

(c) Do you have any known financial/accommodation issues that could affect your ability to complete the course?

Yes		No	
-----	--	----	--

If yes, please describe

.....  
.....

(d) Do you have any known home circumstances that could affect your ability to complete the course?

Yes		No	
-----	--	----	--

If yes, please describe

.....  
.....

(e) Are you prepared to abide by a strict no alcohol, no drugs policy on campus, and no smoking in buildings?

(f) Can you adapt to situations that require you to fit in with other diverse personalities in a band?

.....

(h) Can you point to some achievement that shows you can complete a course of study?

.....  
.....

Please list ANY work experience that you have had in the last five years.

.....  
.....  
.....  
.....

**PLEASE TICK ANY CAREER PATHS THAT INDICATE YOUR PREFERRED DIRECTION.**

Live Sound Engineer		Studio Sound Engineer		Record Producer	
Recording Artist		Film Post Production		Radio Broadcasting	
Television		Project Studio Operator		Recording Studio Owner	
Jingle Producer		Session Producer			

Record Label Owner		Song Writer			
Performer		Other:			

**Signed by the Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_