



MUSIC + AUDIO INSTITUTE OF NEW ZEALAND  
A division of Tai Poutini Polytechnic

## Certificate in Live Sound and Event Production Information Record

**WHICH MAINZ CAMPUS IS YOUR APPLICATION FOR?  
(PLEASE CIRCLE)**

**AUCKLAND**

**CHRISTCHURCH**

Surname: ..... First Names: .....

Date of Birth: ..... Phone (Day) ..... Phone (Night) .....

Address: .....

Mobile: ..... E.Mail: .....

Name of Referee: ..... Phone (Day):..... Phone (Night) .....

*Please answer all questions in your own handwriting. All replies are confidential. There are no right answers for these questions, their purpose is to give us an insight into you as a person. Please answer them honestly and to the best of your ability. NOTE: A CV WILL BE VIEWED IF ATTACHED*

### 1 Educational Background

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

Would you be able to come to Auckland for an interview? YES  NO

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

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4 Please state, in detail, any past audio engineering, lighting or event management experiences that you have had. (e.g. school musicals, equipment at home, etc) Include any methods you have used to gain knowledge in the areas of Live Sound and Event Production.

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5 Please state, in detail, any previous musical experience that you have had.

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

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7 Please list two performances that you have admired and for *each*, fill in the details below and state two specific reasons why the **Live Sound & Event Production** quality of these works impressed you.

Artist	Producer Engineer	Comments

8 Please tick any career paths that indicate your preferred direction.

Live Sound Engineer		Lighting Designer		Loader	
Tour Manager		Promoter		Recording Engineer	
Equipment Rental		Monitor Mixer		Roadie	
Band Manager		Sound/Lighting Company Owner		Performer	
D J Mixer		Radio/TV Broadcasting		Other	

9 On a scale of 1 to 5, please indicate how comfortable you are with machines and technology.

Very comfortable      2                      3                      4                      Not comfortable at all

10 How many hours a week *outside of class time* do you intend to devote to this programme. (Please tick one selection).

2	4	6	8	10	12	14	16	18	20	22	24	26
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11 Please indicate how comfortable you are with working in a group environment.

Very comfortable      2                      3                      4                      Not comfortable at all

12 Please indicate how comfortable you are working with musical styles that differ from your personal taste.

Very comfortable      2                      3                      4                      Not comfortable at all

13 Please tick the actions that you are comfortable with.

Recording to a Cassette Deck	<input type="checkbox"/>	Using a Library Card System to Search Information	<input type="checkbox"/>
Installing Computer Software	<input type="checkbox"/>	Operating a Small PA System	<input type="checkbox"/>
Programming a video machine to record at a certain time	<input type="checkbox"/>	Operating a “Portable Studio” Style Multitrack.	<input type="checkbox"/>
Searching on the Internet	<input type="checkbox"/>		<input type="checkbox"/>

14 From the following list please cross out any items that you would **not** be comfortable with if you were involved in the production.

A Corporate Function	A Dance Party	An Acoustic Band
A Christian Show	A Country and Western Festival	A Reggae Band
A Maori Culture Group	Vengaboys	A Magic Show
Your Friend’s Party	A Heavy Metal Band	A Jazz Band

15 Please state your reasons for choosing to further your education in the area of Live Sound and Event Production.

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16 In your own words, state why one of the places on this programme should be given to you (as opposed to someone else).

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17. If there is any further information that you would like to give us please feel free to use the space below and/or attach a CV (*not compulsory*). Please do not send audio tapes/CDs you will want returned.

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*PERSONAL*

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

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

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

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(d) Can you point to some achievement that shows you have “stickability?”

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

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

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