



# Application form

## BA in Dance Art and Choreographic Thinking

The applicant hereby applies for admission to the 3-year programme of study Bachelor's degree in Dance Art and Choreographic Thinking of 2019 - 2022:

### 1. Contact information

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

Date of birth: \_\_\_\_\_

Social security number: \_\_\_\_\_

Phone number: \_\_\_\_\_

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

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

Registered address: \_\_\_\_\_

**2. General admission**  
(put X in box of choice)

YES

NO

### 3. Former education

(After Primary school and Lower secondary school)

\_\_\_\_\_ year: \_\_\_\_\_

\_\_\_\_\_ year: \_\_\_\_\_

\_\_\_\_\_ year: \_\_\_\_\_

\_\_\_\_\_ year: \_\_\_\_\_

\_\_\_\_\_ year: \_\_\_\_\_



**4. Artistic experience**

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**5. Have you applied/are you planning to apply for any other schools this year?**  
(put X in box of choice)

YES\*

NO

\* If YES, which schools have you applied for?

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**6. What are your plans for when you finish your education?**

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**7. How do you plan to finance your studies at HFDK?**

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## 8. Health

Please fill out the following form. If there is not enough space, use the back of the form. All information will be treated as confidential.

**Name:** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_

1	Do you have a chronic disease (diabetes, epilepsy, rheumatism etc.)? If yes, which one?	YES	NO
2	Are you suffering from asthma and/or allergies? If yes, for how long?	YES	NO
3	Do you have/have you had any kind of heart and/or pulmonary disease? If yes, which one and when?	YES	NO
4	Do you have any kind of abdominal and/or bowel conditions? If yes, which one and when?	YES	NO
5	Do you have reduced hearing and/or vision? If yes, to what degree?	YES	NO
6	Have you ever had a cohesive injury (more than one month), over the last three years? If yes, describe.	YES	NO
7	Have you ever had a fracture? If yes, where and when?	YES	NO
8	Have you ever had an operation on the muscular and/or skeletal system? If yes, when and what kind of operation?	YES	NO
9	Have you suffered/are you suffering from mental illness? If yes, when and what kind?	YES	NO
10	Do you have a history of migraine and/or fainting?	YES	NO
11	Are you taking any medicine regularly (except contraception)? If yes, what kind?	YES	NO

I hereby confirm that all the details about my health are correct and give the personnel at Høyskolen for dansekunst permission to view the information.



## 9. Motivation letter

Write a short description about why you wish to study at Høyskolen for dansekunst, Bachelor in Dance Art and Choreographic Thinking. (If needed please use the backside of this page) (ca. 150-200 words).

## 10. Necessary attachments:

11.1 Diploma: Upper secondary school

11.2 Two photos, minimum 3x3 cm (attach to form)

11.3 Police certificate. Students admitted to the school will have contact with children and therefor need to provide a valid police certificate. Can be forwarded.

Høyskolen for dansekunst is approved by NOKUT (<http://www.nokut.no/en/>). Foreign students must seek a loan in their own national student loan fund.

### Audition will be held in

- **Stavanger / Kulturskolen:** 15<sup>th</sup> of march
- **Bergen / Bergen dansesenter:** 16<sup>th</sup> of march
- **Trondheim / DansiT:** 24<sup>th</sup> of march
- **Tromsø / Kulturskolen:** 30<sup>th</sup> of march
- **Oslo / Rom for dans:** 8<sup>th</sup> – 11<sup>th</sup> of april, 2019

Please check the right box for where you would like to attend the audition.

**The application form must be submitted within March 1<sup>st</sup> 2019 by mail or by email:**

**By mail:** Høyskolen for Dansekunst, Marstrandgata 8, 0566 Oslo, NORWAY

Please note the letter "Application 2019 - 2022".

**By email:** Send application including all attachments to [post@hfdk.no](mailto:post@hfdk.no)

NB: the application must be signed.

**City/date:**

**The applicant's signature:**