



2024 Blackbird Creative Lab

Application Supplement for Individuals

Each member of the ensemble is required to complete the **Supplemental Application for Individual Ensemble Members**. Applications will not be considered complete without this form completed by all members listed on the application.

Basic Information:

- Ensemble Name:
- First and Last Name :
- Preferred/Stage Name:
- Email:
- Phone Number:
- Address:

Section 2: Short Reflection

- Please answer the following questions in 300 words or less: **What is your approach to ensemble work? How do your individual goals align with the goals of the ensemble?**

Section 3: Optional Survey

How did you hear about this opportunity?

- Eighth Blackbird communications
- School/University, specify: *write-in*
- Mailing list; specify source: *Write-In*
- Social media; specify source: *Write-In*
- Friend, peer, artistic
- Colleague, advisor, mentor
- Other: *Write-In*

Age *Write-In*

Please tell us how you self identify:

- Female
- Male
- Trans Female
- Trans Male
- Trans
- Non-binary
- Agender
- Two Spirit

- Self Describe *write in*
- Prefer not to share

Select Pronouns you use:

- She / her
- He / him
- They / Them
- Self Described (provide below, *with text box*)
- Prefer not to share

Which categories best describe you, check all that apply:

- African, African-American, or Black
- Arab, Middle Eastern, or North African
- Asian, South Asian, of Southeast Asian
- Hispanic, Latina/o, or Latinx
- Native American, Indigenous, or First Nation
- Native Hawaiian or Pacific Islander
- White or Caucasian
- Self describe: *Write-In*
- Prefer not share

Do you care to share with us your country of origin? *Write-In*

Do you identify as a person with a disability?

- Yes, I have a disability (or previously had a disability)
- No, I do not have a disability
- Prefer to Self-Describe: *Write-In*
- Prefer Not to Share

Are there any other aspects of your identity that you would like to share in this application? *Write-In*