



# JUDGE APPLICATION

Please mail application to

**Laurie Copeland**  
2209 Walnut Ridge Lane  
Indianapolis, IN 46234  
317.209.9907  
[LCopeland@IHSDTA.org](mailto:LCopeland@IHSDTA.org)

(Please Print or Type)

**Personal Information**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Work Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Email \_\_\_\_\_

**Education**

High School \_\_\_\_\_ Grad Yr \_\_\_\_\_

College/University \_\_\_\_\_ # of Years Attended \_\_\_\_\_

Other training \_\_\_\_\_

**Dance Experience**

Please list any instructional, choreography, and/or performing experience you have

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Have you judged for any other organization? YES NO

If yes, please list what organization, date, location and the name of the event.

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Will you be available to judge weekends in December, January and February? \_\_\_\_\_

Do you understand that attendances to training sessions are mandatory? \_\_\_\_\_



# Judge Application

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### Affiliation Information

List any dance team (s) in Indiana you have instructed, choreographed, consulted or have family affiliation to:

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### Referrals

If you know of anyone who would be qualified to apply for a judge position please give his or her name, address and phone number. The IHSDTA will send them this information. All information provided will be held in the strictest of confidence.

1. Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Work Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Work Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Work Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Also, please list anyone ages 18-20 who you think may be interested in training as a judging apprentice. Include their name, address and phone number.

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How do you think you will positively contribute to the IHSDTA's judging community. Attach response separately.

Please submit a resume and references if available.

\_\_\_\_\_  
Signature

**IHSDTA APPROVED**