



END GAME 2019 APPLICATION

Name		Address	
Email		Skype	
Mobile		Date of Birth	
Are you a current WAT member?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you applying for an U25 place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Which round are you applying for?	<input type="checkbox"/> Starting February 1	Are you participating in...	<input type="checkbox"/> Washington St residency
Do you have any barriers to participating in End Game?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify		
What is your 10 year vision? (Write briefly about your screen ambition – the dream that you have that excites and inspires you. Use the workbook if you need some help – available from the website)			
What is one a goal that you'd like to achieve in 1 to 5 years to help reach your 10 year dream. (is there a goal that you've identified that will help you make some progress towards your dream?)			
What's getting in the way of you achieving the goal listed above?			

By signing this application you agree that you have read and agree to the Course Refund Policy.

(Electronic submission will be accepted as signature).

Signed:

Date:

Applications to be submitted by email to info@wideangle.org.au by 4pm Monday, January 21, 2019