

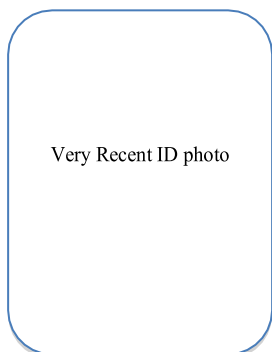


ADMISSION FOR THE 2018/2019 APS (PREPARATORY YEAR) ENTRANCE EXAMINATION

To be sent no later than April 15th 2018

Chosen specialization: _____

CANDIDATE



Very Recent ID photo

Miss/Ms/Mr Last Name _____ First name _____

Date of Birth _____ Country/region _____ Age in 2018 _____

Nationality _____ Mother tongue _____

Height (in centimetres): _____ Weight (in kilograms): _____

Other spoken languages _____

Address _____

Country _____

Email _____ Mobile Phone _____

Single Divorced Married In a couple / Number of dependent children _____

Have you completed Defence and Citizenship day (France) Yes No (If yes, attach supporting documents)

Person to notify in case of accident _____ Phone number _____

Father (LAST NAME and first name) _____

Occupation _____

Address _____

Zip code/City _____

Country _____

Phone number _____

Mother (LAST NAME and first name) _____

Occupation _____

Address _____

Zip code/City _____

Country _____

Phone number _____

How many children are dependent on your parents (including you)? _____

EDUCATION LEVEL

Baccalauréat (or high school graduation equivalent) Yes No (If no, please fill in the additional admission file. If yes, attach the transcript of records)

High school specialisation _____ Graduation year _____

Higher education diplomas _____ Graduation year _____

Level IV Diplomas _____

Other certificates _____

I am currently studying: Last year of high school _____

Others _____

I interrupted my schooling (what year?): _____

Name of the school _____ Phone number: _____

Candidates who were awarded foreign diplomas must provide an attestation of equivalence that they can obtain in the relevant country's French consulate.

MEDICAL INFORMATION

Candidate's social security number _____ (attach a copy of the social security card and of the insurance attestation)

Affiliated Office _____ Address _____

Complementary insurance _____ Address _____

Attending physician's name _____ Phone number _____

Address _____

The collected information is necessary to your application. It will be processed via computer and sent to the association desk. By application of articles 39 and following the law enacted on January 6th 1978, you enjoy a right to access and change your personal information. If you wish to exercise this right and to be communicated your personal information, please address the ENACR head office.

TRAINING

(Attach supporting documents)

Year (from... to)	Please specify in detail the different artistic and technical activities	Number of weeks	Number of hours per week	Establishments' names and locations Teachers' names Approached techniques
Circus Disciplines				
		Number of weeks	Number of hours per week	
ACROBATICS				
		Number of weeks	Number of hours per week	
DANCE				
		Number of weeks	Number of hours per week	

TRAINING

(Attach supporting documents)

Year (from... to)	Please specify in detail the different artistic and technical activities	Number of weeks	Number of hours per week	Establishments' names and locations Teachers' names Approached techniques
DRAMA				
		Number of weeks	Number of hours per week	
MUSIC				
		Number of weeks	Number of hours per week	
Other artistic disciplines and additional information				
		Number of weeks	Number of hours per week	

I hereby certify on my honour the exactness of all the above information

Location.....Date.....Signature:

VIDEOS

BASIC SKILLS

**Please shoot every sequence of movement in a single-sequence shot.
No editing - leave breaks between exercises.**

Please name each sequence with the following title:

Example: V1_Your last name_Your first name.mp4

Hand balance

- **V1:** "Battement"/ Lunge start/ kick up to a positioned handstand/forward roll/tuck up and position your back/ semi-pirouette (half turn) handstand/ pike down, with joined feet/ pike backward roll

Floor acrobatics/Tumbling

- **V2:** Three cartwheels in a row/ three power steps / front handspring/ forward roll/ headspring/ hurdle/round-off
- **V3:** Back flic-flac (=back handspring)
- **V4:** back somersault
- **V5:** a free sequence of movements

Trampoline

- **V6:** Tuck jump/straight jump/ straddle jump/straight jump/ pike jump. Seat drop/ Straight jump to belly drop/straight jump to back drop
- **V7:** Front somersault or Barani
- **V8:** Back summersault
- **V9:** one trick of your choice

Physical Preparation

- **V10:** -10 push-ups;
 - 10 pull-ups;
 - 10 hanging V-snaps (pike up= straight legs to hands)
 - 10 tuck jumps.

Flexibility

- **V11:-** Front split right leg;
 - Front split left leg;
 - Side split;
 - Bridge.

Specialization Discipline

- **V12:** In a 3-minute maximum video, show the tricks you master in your specialization discipline.

No editing

QUESTIONNAIRE

Have you already enrolled in a preparatory school for examination entrances? If yes, which one?
(School stamp, director's signature, and head of studies' signature are mandatory)

If no, are you enrolled in a circus school? If yes, which one? Since when?

What are your reasons for practicing the circus arts?

What performances and artistic projects have marked you the most? Why?

How did you hear out about the ENACR/CNAC program?

Documents to include in your file

<p style="text-align: center;">To be sent by email mapy.mouisson@enacr.com</p>	<ul style="list-style-type: none"> Admission file; Additional admission file to be filled in only in case the candidates ask for a waiver: <ul style="list-style-type: none"> - If they are not the holder of a baccalauréat or foreign equivalent - If they don't have the required 500 hours of circus, acrobatics, gymnastics, or dance practice during the last two years.
<p style="text-align: center;">To be sent by post to ENACR 22 rue Jules Guesde 93110 Rosny-sous-Bois</p>	<ul style="list-style-type: none"> A resume and a cover letter; An attestation of 500 hours of practice annually over the course of two years in circus arts or, if applicable, in gymnastics, acrobatics, or dance; A copy of your high-school diploma and a grade report, which may be either French or a foreign equivalent. For foreigners, a letter from a French consular authority attesting to the equivalency of your diploma, is necessary. <li style="color: red;">60 euro for inscription fees: <p><i>By check, payable to ENACR (for French candidates)</i></p> <p><i>By international transfer (for foreigners)</i> <i>Bank references</i> IBAN: FR76 3000 3039 8300 0372 7114 182 BIC: SOGEFRPP;</p> <ul style="list-style-type: none"> 4 recent and original ID photos A photocopy of the front and the back of your ID or passport; 1 medical certificate permitting intense physical activity, issued within the last three months The duly completed medical file For minors, the parental authorization A copy of your health insurance and social security information If applicable, proof of compliance with your national defense enrolment programs A birth certificate, translated if necessary, to present at the pre-selection stage The requested videos on a USB drive (no CDs) <p style="color: red; font-weight: bold;"><i>All USB drives received after the 15th of April will not be accepted.</i></p>

**Medical procedure
authorisation**

ENACR's direction kindly asks:

- Ms. or Mr. _____
- Parents/guardians of _____

To designate, in the event of a medical or surgical emergency, a person able to take a decision in their absence:

Name _____

Address _____

Phone number _____ Mobile phone _____

Location _____ Date _____

Signature(s)
