



The Young Shakespeareans

AUDITION FORM / CASTING SHEET

Please fill out this form. Write clearly so it can be easily read.

TODAY'S DATE:
YOUR NAME:
ROLE DESIRED: First Choice
Second Choice
Third Choice

ONLY TEACHERS FILL OUT THE SPACES BELOW, BUT NOTE THE SKILLS BELOW THAT WILL BE CONSIDERED WHEN CASTING THE PLAY.						
SKILLS:	0 (weak) to 5 (strong)					
	0	1	2	3	4	5
Stage Presence (Energy/Comfort on Stage)						
Volume						
Diction (Speaking Clearly)						
Expression (Showing how the Character Feels)						
Comprehension (Understanding what is being said)						
Taking Direction (Using the Adjustments given)						
Memorization						
NOTES:						