

National Honor Society for Dance Arts

Verification of Activity Form

Student Name: _____

Company/Studio Name: _____

Address: _____ City, State: _____ Zip Code: _____

Print Contact Name: _____ Position: _____

Company/Studio Phone Number: _____ Fax Number: _____

E-Mail address: _____

Activity (class, production, etc.): _____

Write a paragraph describing the nature of your activity (i.e. how many times did the class meet, what was the production, etc.) and what you learned from your experience.

Authorized Signature: _____ Position: _____ Total Hours: _____