UNIVERSITY OF GEORGIA DEPARTMENT OF DANCE PROFESSIONAL TRACK CERTIFICATION INFORMATION SHEET

Name:
Address:
Phone:
Email:
Academic Degree, School, Date earned:
Are you currently employed as a Dance Specialist in a K12 school? Current Employer/Address/District:
Brief description of your situation/request for obtaining certification:
Please mail this form along with transcripts to:
Professor Rehecca Gose

263 Dance Building University of Georgia Athens, GA 30605

For more information or questions contact: Email: renghaus@uga.edu