



## OCEAN STATE STAR AWARDS PRODUCTION APPLICATION

Production applications must be submitted at least 4 weeks prior to your first production. Late submissions **MUST** be approved and are subject to a \$150 late fee per production (inclusive of double casting).

### CONTACT INFORMATION

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School Name

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School Address

School Phone

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Contact Person

Title

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Contact Email

Contact Phone

Contact email address will be the primary means of communication. Providing an email address is mandatory.

### STUDENT & PARENT LIAISON INFORMATION

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Student Liaison Name

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Student Liaison Contact Email Address

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Adult Liaison Name

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Adult Liaison Contact Email Address

Contact email address will be the primary means of communication. Providing an email address is mandatory.

### SHOW INFORMATION

**You are required to keep the music for drums, bass, guitar and piano until after the Ocean State Star Award winners are announced May 2025.**

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Name of Musical

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List all Dates & Times of Musical for Each Cast/Production

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List all Dates & Times of Musical for Each Cast/Production (cont'd.)

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Performance Location (please list COMPLETE address)

## INFORMATION FOR REVIEWERS

**NOTE:** Please be advised that adjudicators attending your production are provided with a copy of this section prior to attending the performance. This is your opportunity to communicate with the adjudicators regarding the resources available to your school, the rationale behind a particular show choice, the vision of the director(s), and the special challenges faced in each unique school setting. Please attach an additional sheet if necessary.

1. **Please enter names of technical artists** and check the box whether the positions below are held by adults or students for your production:

	Adult	Student		Adult	Student
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Director			Lighting Designer		
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Music Director			Sound Designer		
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Choreographer			Costume Designer		
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Stage Manager			Hair/Makeup Artist		
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Set Designer			Orchestra Leader		

2. Total number of people involved in production: Students \_\_\_\_\_ Adults \_\_\_\_\_

3. Please indicate what percentage of your orchestra is composed of students: \_\_\_\_\_%

4. Please indicate the percentage of set and costumes that are built versus rented/borrowed:

Set Built %:

Costumes Built %:

Set Rented/Borrowed%:

Costumes Rented/Borrowed %:

5. What is your school's budget for this musical? \$ \_\_\_\_\_

Please provide a breakdown of budget below:

Musicians %:

Royalties %:

Designers %:

Other %:



6. Please indicate the sources of these funds, with an estimated percentage breakdown (i.e. 60% Ticket Sales, 40% Donations).

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Ticket Sales %:

School Board Allocation %:

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Student Fundraising %:

Community Support %:

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Donations %:

Other %:

7. Please indicate which calls your stage manager makes during the production:

Light Cues       Sound Cues       Scene Changes

8. Please provide a brief overview of your school's production history.

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9. Please provide a brief synopsis of your chosen production.

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10. Explain why you selected this year's musical. Include any special conditions related to the production.

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## CERTIFICATION

I have read the program Rules and Guidelines for the Providence Performing Arts Center Ocean State Star Awards (listed at [www.ppacri.org/oceanstatestarawards](http://www.ppacri.org/oceanstatestarawards)) and I certify that all of the information above is correct.

## PLEASE SIGN

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Signature

Date

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Print Name

If you have any questions about this application or the Ocean State Star Awards program, please contact Dana Brazil at (401) 574-3132 or email at [dbrazil@ppacri.org](mailto:dbrazil@ppacri.org).

### APPLICATION CHECKLIST

- Complete and sign application form
- Mail or email application packet to:

**Providence Performing Arts Center**  
**Attn: Dana Brazil, Ocean State Star Awards**  
220 Weybosset Street  
Providence, RI 02903

**e. [dbrazil@ppacri.org](mailto:dbrazil@ppacri.org)**  
**p. (401) 574-3132**