



APPLICATION FOR 'RTS' RECOGNISED TEACHER STATUS

REQUIREMENTS FOR RECOGNISED TEACHER STATUS

Applicants must hold one or more of the following:

- a) A Teaching Qualification with the UTD
- b) A Teaching Qualification with a CDMT Recognised Awarding Body
- c) A formal qualification in dance, musical theatre or the teaching of these genres (Diploma, Degree, etc)

For non UTD Members applying for the first time:

Applicants must hold a valid DBS Certificate, Evidence of the necessary insurance, Evidence of a valid First Aid Certificate. Within their first year of membership they must also attend a minimum of 1 CPD Event with the UTD and hold an examination session that meets the standard and expectations of the Association.

For UTD Members applying for RTS Status:

Applicants must hold a valid DBS Certificate, Evidence of the necessary insurance, Evidence of a valid First Aid Certificate. Applicants must have also attended a minimum of 1 CPD event with the UTD and held an examination session that meets the standards and expectations of the Association within the last 12 months

When returning your application form to Head Office please also include the following

- Copies of qualifications mentioned on this application
- Copy of a valid DBS Certificate, relevant insurance and a valid First Aid Certificate

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|---|----------|--------------|--|
| FULL NAME | | | |
| ADDRESS | | | |
| | | | |
| | POSTCODE | | |
| DATE OF BIRTH | | TELEPHONE NO | |
| EMAIL ADDRESS | | | |
| ALTERNATIVE CONTACT NO | | | |
| DATE OF THE MOST RECENT UTD CPD EVENT YOU ATTENDED Only applicable to those with existing UTD Membership. | | | |
| | | | |
| DATE OF THE MOST RECENT UTD EXAMINATION SESSION YOU HELD Only applicable to those with existing UTD Membership. | | | |
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| SUBJECT QUALIFICATIONS | | | |
|------------------------|------------------------|---------------|---------------------|
| SUBJECT | HIGHEST LEVEL ACHIEVED | AWARDING BODY | DATE OF EXAMINATION |
| BALLET | | | |
| MODERN | | | |
| TAP | | | |
| ACROBATICS | | | |
| LYRICAL | | | |
| MUSICAL THEATRE | | | |
| STREET DANCE | | | |
| FREESTYLE | | | |

| ADDITIONAL QUALIFICATIONS |
|---|
| Please list any additional qualifications that you feel may be appropriate for the UTD to have knowledge of |
| |

Consent and Declarations:

I agree to have my personal details kept on file only for the purpose of membership with the United Teachers of Dance LTD and understand that my data will always be kept secure. I agree to be contacted by post, email, telephone and any social media accounts related to the Association that I have freely joined in the event of an emergency, to receive updates, reminders, invoices and newsletters as necessary in accordance with the United Teachers of Dance Data Protection & Privacy Policy.

Yes, consent is given No consent is not given

I agree and understand that acceptance of Registered Teacher Status is granted based on the information provided on this form. Registered Teacher Status is only to be advertised once annual subscription fees have been paid to the United Teachers of Dance.

If at any time the information given freely on this form proves to be incorrect the United Teachers of Dance reserves the right to, either, withhold provisional membership or in cases where it has already been awarded, revoke it.

I agree and confirm below that to the best of my knowledge the information given on this form is true and correct.

Full Name: _____



Signature: _____ Date: _____