

Casting Call Evaluation Form

Name of Participant:

Possible Roles of Participant:

Rate Participant on Look for Role

1 2 3 4 5 6 7 8 9 10

Rate Participant on Believability

1 2 3 4 5 6 7 8 9 10

Rate Participant on Actions

1 2 3 4 5 6 7 8 9 10

Rate Participant on Preparation

1 2 3 4 5 6 7 8 9 10

Rate Participant on Facial Expressions

1 2 3 4 5 6 7 8 9 10

Rate Participant for Call Back

1 2 3 4 5 6 7 8 9 10

Rate Participant's Interaction/actors

1 2 3 4 5 6 7 8 9 10

Rate Participant's Voice Tone

1 2 3 4 5 6 7 8 9 10

Rate Participant on Question Period

1 2 3 4 5 6 7 8 9 10

Rate Participant Overall

1 2 3 4 5 6 7 8 9 10

Comments:

Casting Call Personnel Information

Name:

Age:

Address:

Hair Color:

Eye Color:

e-mail Address:

Phone Number:

Previous Acting Experience:
