Pre-College Summer Studio Application

INSTRUCTIONS

Please contact the Continuing Education Office with any questions at precollege@smfa.edu, 617-369-3636 or 617-369-3644. Fill out all pages of the application form and submit it with all required items (see checklist below and smfa.edu/precollege for details). **Mail or fax application to: School of the Museum of Fine Arts, Boston, Continuing Education Office, 230 The Fenway, Boston, MA 02115. Fax: 617-369-3679.**

REQUIREMENTS

Checklist of requirements:

- ☐ Application
- ☐ Letter of recommendation
- ☐ Essay
- ☐ Portfolio
- ☐ Application fee $50

STUDENT INFORMATION

Name:_____
First Middle Last

Social Security #:_____ Date of birth:_____ Gender:_____
(mm/dd/yy) (M/F)

E-mail:_____

Phone:_____
Daytime phone Evening phone Cell phone

Student mailing address:_____

City State ZIP code Country

PARENT OR GUARDIAN INFORMATION

Name:_____

E-mail:_____

Phone:_____
Daytime phone Evening phone Cell phone

Parent/Guardian mailing address:_____

City State ZIP code Country

PARENT OR GUARDIAN SIGNATURE

By signing I declare that I have read and understood the enclosed application materials.

Signature:_____ Date:_____

STUDENT PROFILE

Check your status: ❑ Residential ❑ Commuter

Are you a U.S. citizen? ❑ Yes ❑ No

Are you considering other programs for summer 2010? ❑ Yes ❑ No

If so, what programs?_____

Will you be applying for a need- or merit-based scholarship? ❑ Yes ❑ No

EDUCATION

What high school are you attending?_____

What year do you expect to graduate?_____ Name of your primary art teacher?_____

How did you learn about the Pre-College Summer Studio (Please check all that apply)?

❑ My art teacher ❑ Mailing from SMFA ❑ Friend ❑ Summer opportunities fair

❑ SMFA Web site ❑ Web search ❑ Advertisement in magazine

❑ Other Please specify: _____

INTERNATIONAL APPLICANTS

If you are not a U.S. citizen, what citizenship do you have?_____

What type of visa do you now hold? Please check one:

❑ Permanent resident ❑ Student visa ❑ F-1 refugee ❑ Visitor visa ❑ None

❑ Other (please specify):_____

Is English your second language (check one)? ❑ Yes ❑ No

Date of TOEFL test taken:_____ or, date TOEFL will be taken:_____

Your TOEFL score:_____

Did you take the paper test, computer test, or internet-based test?_____

APPLICATION FEE

A $50 nonrefundable application fee is due with the application.

Method of payment (check one):

❑ MasterCard ❑ VISA ❑ Check (payable to SMFA) ❑ Money order (payable to SMFA) ❑ Cash

I authorize the charging of $50 to:_____

Card number Expiration date 3-Digit security code (Next to signature on back.)

Daytime phone:_____ Billing ZIP:_____

Cardholder name:_____ Cardholder signature:_____

PORTFOLIO

❑ My portfolio is enclosed, and all materials are clearly marked with my name.

❑ My portfolio will follow under separate cover.

FOR OFFICE USE ONLY

Processed_____ Class List_____ Entered By_____ Confirmed_____

Deposit Received_____ Receipt_____ Balance_____ Received_____ Receipt_____ Refund Due_____