

SCHOOL OF MEDIA ARTS STUDENT APPLICATION FORM

STUDENT INSTRUCTIONS: Please complete this application form and submit it with your portfolio or work samples. All of this information, including PART III – the *Statement of Artistic Intent* – is very important to the adjudication process.

PART I: STUDENT INFORMATION (To be completed by student - please print clearly)

Your Name _____ Age _____

Date of Birth _____ Grade Level _____ Gender/Preferred Pronoun _____

Home Address _____ City _____ State _____ Zip Code _____

Student Cell # _____ Student Email _____

Parent Cell/Home # _____ Parent Email _____

School _____ Principal _____

School Address _____ City _____ State _____ Zip Code _____

Media Teacher(s) _____ Email _____ School Telephone _____

I am submitting work in (check box that applies):

Digital Animation Sound Art Photography Video Film Other

I am applying to NYSSSA for (check one):

Digital Animation Sound Art Photography Video Film

