



ACADEMY OF COUTURE ART ADMISSION APPLICATION

APPLICANT INFORMATION

<i>Last Name</i>	<i>First Name</i>
<i>Middle Initial</i>	<i>US Social Security Number</i>
<i>Street Address</i>	<i>City</i>
<i>State</i>	<i>Zip Code</i>
<i>Country</i>	<i>Country of Citizenship</i>
<i>Phone (Country+Area)</i>	<i>Fax (Country+Area)</i>
<i>Cellular (Country+Area)</i>	<i>E-mail</i>
<i>Date of Birth (mm/dd/yy)</i>	<i>Gender</i> <input type="checkbox"/> <i>Male</i> <input type="checkbox"/> <i>Female</i>

FOREIGN STUDENTS

<i>Type of visa hold if any</i>

EDUCATION INFORMATION

<i>Last High School attended (name and complete address)</i>	
<i>Entry Date (mm/dd/yy)</i>	<i>Graduation Date (mm/dd/yy)</i>
<i>List of all Colleges attended for course credit (Names and complete addresses, entry and leaving dates, degrees if obtained)</i>	

PARENT / GUARDIAN INFORMATION

Last Name	First Name
Middle Initial	US Social Security Number
Street Address	City
State	Zip Code
Country	Country of Citizenship
Phone (Country+Area)	Fax (Country+Area)
Date of Birth (mm/dd/yy)	E-mail

AREA OF INTEREST

<p><i>Major Requested (select a Major and circle a Degree)</i></p> <p><i>AFA and BFA Degree Programs:</i></p> <ul style="list-style-type: none"><input type="checkbox"/> Fashion Design (AFA - BFA)<input type="checkbox"/> Pattern Design (AFA - BFA)<input type="checkbox"/> Costume Design (AFA - BFA)<input type="checkbox"/> Costume Pattern Design (AFA - BFA)<input type="checkbox"/> Footwear and Accessory Design (AFA - BFA)<input type="checkbox"/> Textile Design (AFA - BFA)<input type="checkbox"/> Interior Architecture (AFA - BFA)<input type="checkbox"/> Merchandising (AFA - BFA) <p><i>For Professionals:</i></p> <ul style="list-style-type: none"><input type="checkbox"/> Creative Fashion Design Laboratory Certificate<input type="checkbox"/> Creative Pattern Design Laboratory Certificate<input type="checkbox"/> Professional Fashion Design Laboratory Certificate<input type="checkbox"/> Professional Pattern Design Laboratory Certificate <p><i>Recreational programs:</i></p> <ul style="list-style-type: none"><input type="checkbox"/> Saturday Couture Camp<input type="checkbox"/> Summer Fashion Camp	<p><i>Quarter Requested (select one)</i></p> <ul style="list-style-type: none"><input type="checkbox"/> January 2009<input type="checkbox"/> April 2009<input type="checkbox"/> July 2009<input type="checkbox"/> October 2009<input type="checkbox"/> January 2010<input type="checkbox"/> April 2010<input type="checkbox"/> July 2010<input type="checkbox"/> October 2010<input type="checkbox"/> January 2011<input type="checkbox"/> April 2011<input type="checkbox"/> July 2011<input type="checkbox"/> October 2011<input type="checkbox"/> January 2012<input type="checkbox"/> April 2012<input type="checkbox"/> July 2012<input type="checkbox"/> October 2012<input type="checkbox"/> January 2013<input type="checkbox"/> April 2013<input type="checkbox"/> July 2013
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SCHOLARSHIP REQUEST

Would you like to be considered for Scholarship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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FAX THIS FORM TO: 310-967-8888

- OR -

EMAIL TO: admissions@acawh.com