FIA ART SCHOOL
Pre-College Portfolio Development Program

Application Requirements & Checklist

☐ Visual Art Portfolio Review
Three to eight images of your best work are required. Samples must include at least two examples of observational drawing (still life, landscape, self-portrait, etc.) Images may be emailed to arted@flintarts.org or may be included with application as letter-sized (8.5 x 11) color copies.

☐ Application Form (Parent and Student sections)

☐ Teacher Recommendation Form
One recommendation form must be filled out by a school teacher or a personal reference (no family relation) and included in your application packet.

☐ Need Based Scholarship Applications
Include scholarship applications with the application documents. (only required for those seeking tuition assistance)

All forms must be completed and returned by October 25, 2019. Classes will begin December 2.

RETURN DOCUMENTS TO
BY MAIL
FIA Art School
1120 E. Kearsley St.
Flint, MI 48503

BY EMAIL
arted@flintarts.org
Today's Date _______________________________

CONTACT INFORMATION

Student Name _______________________________ Grade Level _______________________________

Student's Date of Birth _______________________________ Student Email _______________________________

Mailing Address _______________________________ City, State, Zip Code _______________________________

Home Phone _______________________________ Caregiver Cell Phone _______________________________

Caregiver Name _______________________________ Caregiver Email _______________________________

SCHOOL INFORMATION

School Name _______________________________ City _______________________________

Art Teacher Name _______________________________ English Teacher Name _______________________________

School Counselor Name _______________________________ School Phone Number _______________________________

PREFERRED MEDIUM(S) Please check as many boxes as applicable.

☐ Drawing      ☐ Photography      ☐ Sculpture      ☐ Painting

☐ Graphics      ☐ Illustration      ☐ Other: _______________________________
Why would you like to participate in this program?
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______________________________________________________________________________
Do you intend to major in visual art at college? Why?
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What are your strengths as an artist and where do you think you need the most work?
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______________________________________________________________________________
______________________________________________________________________________
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______________________________________________________________________________
Please describe your work ethic, i.e. how do you manage your time and how disciplined are you when faced with challenging projects and creative tasks?

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Please list three colleges that interest you. Why does each appeal to you?

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Please describe why you would be a good fit for this program.

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The program meets once per week and offers the opportunity for serious students to further their artistic development with a curriculum focused on developing competitive visual arts skills for college applications. Do you feel your student has the work ethic and drive necessary to take full advantage of this opportunity? Please give an example of your student’s work ethic.

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What are your expectations of this program?
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What type of college program or career path do you currently envision for your student?
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PDP Recommendation Form

APPLICANT
Please give this form to a teacher you feel will best be able to discuss your qualifications as a student and artist. If you are homeschooled, please ask an adult non-family member to complete the form.

RECOMMENDER
Please complete either the Personal or Academic Reference portion depending on your relationship with the applicant.

Student Name ________________________________________________________________

PERSONAL REFERENCE

Name ___________________________ Relationship to Applicant _________________________

Mailing Address ___________________________ City, State, Zip Code ______________________

Home Phone ___________________________ Cell Phone _________________________________

Email _______________________________ Signature ____________________________________

ACADEMIC REFERENCE

Teacher/Counselor Name ___________________________ School Name ______________________

Subject Taught ___________________________ City, State, Zip Code ______________________

Email _______________________________ Signature ____________________________________
Please describe the student’s level of artistic skill and creative potential.

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Describe the student’s commitment to their artistic development.

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Describe the student’s class attendance and overall maturity level as it relates to preforming in an extended high level portfolio program.

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FIA Art School Scholarships are made possible through the generosity of many organizations and individuals who believe that quality art experiences should be available to everyone regardless of their financial circumstances. Scholarships are offered to those students who could not otherwise afford to take classes at the FIA. Scholarships are granted to eligible students on a first-come first-served basis while funding remains.

- Write in your household income and include a copy of your household’s most recent Federal Income Tax Return
- Tuition assistance will not cover the full cost of tuition.
- This document will be held in confidence by the Art School Administration
- Completed form and documentation should be mailed or emailed to the Art School.

To be completed by applicant or guardian of applicants who are 17 years and younger:

Student Name ___________________________ Age of Student (if a minor) ___________________________

Parent/Guardian Name (if applicant is a minor)

Financial Information (REQUIRED):

- Gross annual household income as shown on your tax return (must include official documentation) $____________________
- Number of persons supported by this income: _________
- How much do you feel you can contribute toward your tuition? (Please note: actual scholarship/tuition amount will depend upon many variables including availability of funding and household income level.) $________________________

To be completed by applicant or guardian of applicants 17 years and younger:

If awarded, I _____________________________ (guardian’s name) will pay the co-pay stated in the award letter by the specified date or the scholarship will be voided. If I have applied on behalf of a minor, I will also provide transportation for the duration of the class. If more than two classes are missed, I understand that I (or the minor I represent) will not be eligible for FIA Art School scholarships in the future.

The Flint Institute of Arts does not discriminate with regard to race, religion, sex, creed, handicap, age, or national origin. This program is made possible through contributions to the FIA Art School.