ART EDUCATION OPTION

GRADUATE SCREENING APPLICATION FORM

Application Deadline:
FALL — Second Friday in April
WINTER — Second Friday in October
SPRING — Second Friday in January

Date _____

Quarter for Screening _____

Name _____ CIN# _____
Last *First*

Mailing Address _____

_____

Home Phone _____ Work Phone _____ E-Mail _____

Application Checklist for Portfoliio Screening:

_____ BA Degree Year _____ Major _____

University _____

_____ Admission to CSULA

_____ GPA for Last 90 Units = _____

_____ Copies of Transcripts

_____ Two Letters of Recommendation

Strength of Recommendations _____

_____

_____ Sample Lessons

Quality of Lessons _____

_____ Written Responses to Screening Questions

Comments _____

_____

_____ Oral Interview

Comments _____

_____

COMMITTEE DECISION: Approved _____ Declined _____ Qualifying Coursework Program _____

Signatures: _____ Date _____

_____ Date _____

_____ Date _____

_____ Date _____

9/2006 **ADVISER:** _____