

GRADUATE APPLICATION/SCREENING FORM

Studio Arts _____

Degree Objective: MA _____ **MFA** _____

Grad Admission Application Deadline:

FALL — TBD

SPRING — TBD

Date _____

Screening Semester _____

Name _____ CIN# _____

Last

First

Mailing

Address _____

Home Phone _____ Work Phone _____ E-Mail _____

Specialization:

Studio Arts: Painting _____ Ceramics _____ Photography _____ Sculpture _____ New Genres _____

Screening Level: Portfolio _____ Proposal _____ Progress _____ FINAL _____

Special Room or Time Request: _____

Adviser Approval for Screening: _____ Date: _____

(STUDENT IS RESPONSIBLE TO CONFIRM THE DATE AND TIME OF SCREENING — 323-343-4010)

Application Checklist

for Portfolio Screening: BA _____ BFA _____ Year _____ Major _____

University _____

_____ Admission to CSULA

_____ GPA, Last 2 years _____

_____ Copies of Transcripts _____

_____ 2 Letters of Recommendation _____

_____ Slides / CD / Videotape _____

_____ Statement of Objectives for Graduate Study _____

COMMITTEE

DECISION: Approved _____ Declined _____ Qualifying Coursework Program _____

Admission Note (optional):

Option Chair _____ Date _____

Faculty Signature _____ Date _____

Faculty Signature _____ Date _____

Faculty Signature _____ Date _____