

COMMUNITY ACADEMY WORKSHOP | WALNUT HILL

a p p l i c a t i o n f o r m

Please select date for attendance:

- November 6th, 2010
- April 9th, 2011

Applicant Information

Name _____

Address _____ City, State, Zip _____

Home Phone _____ Email _____

Age _____ Date of Birth _____ Male Female

Current Grade _____ Year of high school graduation _____

Name of Present School _____

Please list any classes or activities you have been involved in that are related to this workshop.

How did you hear about the Community Academy Workshops?

To complete the application for **Visual Art**, please send two pieces of your best work in slide or jpeg format to jkohl@walnuthillarts.org. You may also print out the slides and send along with your application materials.

Please list the name of the teacher whom you have asked to write a reference:

Name _____

Subject taught _____

Telephone _____

Email _____

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