

**ATTACH THIS SHEET TO THE OUTSIDE OF YOUR PORTFOLIO
AND BRING YOUR PORTFOLIO TO THE MCA ADMISSIONS OFFICE BY
Monday, September 15, 2008**

APPLICATION FOR A.P. ART AT MCA

please print:

NAME _____

STUDENT'S HOME
ADDRESS _____

CITY & STATE &
ZIP _____

PHONE _____ HOME
EMAIL _____

ART TEACHER _____

HIGH
SCHOOL _____

YEAR OF HIGH SCHOOL
GRADUATION _____

HOW MANY YEARS OF ART HAVE YOU
HAD? _____

HAVE YOU TAKEN AP BEFORE? _____ IF YES, WHAT SCORE? _____

DO YOU INTEND ON MAJORING IN THE VISUAL ARTS AT THE
COLLEGE LEVEL? _____

ARE YOUR INTENTIONS TO STUDY AT AN ART COLLEGE? _____

WILL YOU DEFINITELY HAVE TRANSPORTATION TO THE AP CLASS
EACH SATURDAY IF YOU ARE ACCEPTED? _____

DO YOU HAVE ANY CONFLICTS ON SATURDAYS THAT WILL TAKE
PRIORITY OVER YOUR AP
CLASS? _____

CAN YOU COMMIT TO ENOUGH TIME OUTSIDE OF CLASS TO FULFILL
YOUR CONCENTRATION REQUIREMENT (This means you will have
homework, are you ready for it?) _____

Do Not Write Below This Line

ACCEPT _____ NOT ACCEPT _____