



Date: _____

Please print clearly! Very clearly!

STEP #1

Which program are you applying for?

Program Name: _____

Summer Fall Spring

Year: _____

STEP #2

Student Information

First Name: _____ Middle Name: _____

Last Name: _____

Birth date: _____ Age: _____ Gender: Female Male

Address: _____

City: _____ State: _____ Zip code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

What is your primary language: _____

STEP #3

Parent Information

Mother's Name: _____

Father's Name: _____

Do you live with both parents? Yes No

If No, who do you live with? _____

What is their name? _____

If the Parent or Guardian address is different from above, please provide below:

Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____

STEP #4

Education

Are you currently enrolled in school? Yes No

Name of currently enrolled school: _____

Grade Level: _____

Are you currently enrolled in art classes? Yes No

If Yes, please describe: _____

What is your Art Instructor's name? _____

PLEASE CONTINUE TO THE NEXT PAGE.

STEP #5

Personal Interests

Describe any hobbies or personal interests (reading, stamp collecting, bike riding, science, etc.):

Have you ever been involved in any extra-curricular activities (after-school programs or community activities)? If so, please describe:

Describe your artistic interests (painting, drawing, sculpture, photography, graphic design, performance, writing, etc.):

STEP #6

Medical and Emergency Information

Do you have any medical condition(s) that would keep you from performing and/or completing classroom activities or assignments?

Yes No

If Yes, please explain:

In case of emergency, who can we call?

Name:

Address:

Home Phone:

Cell Phone:

Work Phone:

Please know that if you are under 18 years of age, you **MUST** have a Parent of Guardian present with you during the interview process. A Yollocalli staff member will inform you of the interview times and days so you and your guardian can make arrangements.

Once all steps are completed please sign below, or if returning this form through email, please sign during your interview.

Applicants Signature: _____

Date: _____