

APPLICATION FOR ADMISSION

Please complete this form in detail after reading it carefully. *(Please Print)*

If additional space is needed, attach an extra sheet(s) of paper to the application.

1. Name _____
(Last Name) (First Name) (Middle)

2. Social Security Number

--	--	--	--

 -

--	--

 -

--	--	--	--	--	--

 D.O.B. ____/____/____

3. If any of your records are under a name other than the one given above (for example, your maiden name), please list the name(s) below.

(Last Name) (First Name) (Middle)

(Last Name) (First Name) (Middle)

4. Permanent Address _____
(Street or P.O. Box) (Apt No.)

(City) (State/Country) (Zip/Postal Code)

5. Current Address, if different _____
(Street or P.O. Box) (Apt No.)

(City) (State/Country) (Zip/Postal Code)

-How long do you expect to be living at this address? _____

Employed by _____

6. Telephone: Home (_____) _____ Fax (_____) _____
 Business (_____) _____ E-Mail (_____) _____

7. Father (or guardian) _____ Mother (or guardian) _____
(Last Name) (First Name) (Last Name) (First Name)

Father's address, if different from your address _____ <small>(Street or P.O. Box) (Apt No.)</small> _____ <small>(City) (State/Country) (Zip /Postal Code)</small>	Mothers's address, if different from your address _____ <small>(Street or P.O. Box) (Apt No.)</small> _____ <small>(City) (State/Country) (Zip /Postal Code)</small>
---	--

Telephone (Home) (_____) _____ Telephone (Home) (_____) _____

8. Spouse (if married) _____ Occupation _____
(Last Name) (First Name)

(continued)

Do Not Write In This Area

Date Received _____	ADA Number & Initials _____
Amount Paid _____	Inquiry Number _____
Check Cash Money Order Credit Card	Entered By/Date _____

9. Program of Study for Which You Are Applying:
(please check your choice)

ASSOCIATE OF OCCUPATIONAL STUDIES DEGREE

• Art & Design

- Graphic Design**
Seven 11-week quarters (77 weeks) (105 credits)
- Fashion Design**
Seven 11-week quarters (77 weeks) (105 credits)
- Interior Design**
Seven 11-week quarters (77 weeks) (105 credits)
- Web Design & Interactive Media Design**
Seven 11-week quarters (77 weeks) (105 credits)
- Video Production**
Seven 11-week quarters (77 weeks) (105 credits)

<input checked="" type="checkbox"/> Check quarter starting date:	<input type="checkbox"/> May 8, 2008	<input type="checkbox"/> July 14, 2008	<input type="checkbox"/> August 21, 2008	<input type="checkbox"/> October 6, 2008
	<input type="checkbox"/> November 13, 2008	<input type="checkbox"/> January 12, 2009	<input type="checkbox"/> February 19, 2009	<input type="checkbox"/> April 6, 2009
	<input type="checkbox"/> May 14, 2009	<input type="checkbox"/> July 13, 2009	<input type="checkbox"/> August 20, 2009	<input type="checkbox"/> October 5, 2009
	<input type="checkbox"/> November 12, 2009			

INTERNATIONAL STUDENT INFORMATION

I am not a U.S. citizen. Do you need student nonimmigrant alien status to attend AiNYC, if yes,

Country of Citizenship _____ Country of Birth _____

10. Educational Background

THE APPLICANT IS RESPONSIBLE FOR PROVIDING THE ART INSTITUTE WITH OFFICIAL COPIES OF HIGH SCHOOL TRANSCRIPTS AND/OR G.E.D. CERTIFICATE AND ALL SCORES RECEIVED ON THE G.E.D. EXAMS. IF THE APPLICANT IS REQUESTING EARLY ACCEPTANCE BEFORE COMPLETION OF HIGH SCHOOL, THEN THE APPLICANT IS RESPONSIBLE FOR PROVIDING TO THE ART INSTITUTE COPIES OF BOTH PARTIAL TRANSCRIPTS AS WELL AS FINAL TRANSCRIPTS FROM HIGH SCHOOL UPON GRADUATION.

Name of Secondary School _____ Date of Secondary School Graduation _____

Address of Secondary School

(Street or P.O. Box) (Apt No.)

(City) (State) (Zip/Postal Code)

Name of Secondary School Counselor _____

Cumulative Grade Point Average and Scale _____

If not a Secondary school graduate, date of G.E.D. certificate _____

(continued)

Have you attended a college, university or other post-secondary schools prior to today? (Please check one): Yes No

Institution	City/State/Country	Dates Attended	Type of Program	Number of Credits Earned	Degree or Certificate Earned	Transfer the Credits to the Institute?

If you did not complete any of the above programs, please explain: _____

11. How did you hear about The Art Institute? _____

12. Have you visited The Art Institute? (Please check one): Yes No If yes, date visited _____

13. When you attend The Art Institute, will you:
 apply for school-sponsored housing?
 Desire assistance in finding independent housing?
 commute?

14. Have you ever been convicted of or pled guilty to a crime other than a summary traffic offense?

Yes No Do not leave this answer blank. If yes, describe in full.

15. Please list any Art Institute, school, or other post-secondary schools attended and reasons why you stopped attending (if you did not graduate). Write "none" if you did not attend any other post-secondary or Art Institute schools.

16. Please provide information regarding any disciplinary matters you were involved in at any Art Institute or other post-secondary schools you have attended. Write "none" if there were no disciplinary matters at any Art Institute or other post-secondary schools attended.

(Attach a separate sheet if necessary)

(continued)

