



SIENA ART INSTITUTE

Drawing As Seeing 2018

<http://sienaaart.org/Special-Programs/Drawing-as-Seeing/DrawingasSeeing@gmail.com>

Instructors: Pamela Lawton and Annie Leist

APPLICATION FORM

Please return completed and signed form to DrawingasSeeing@gmail.com to request a place in the July 2018 Drawing as Seeing session. The final deadline for receipt of application forms is **April 15, 2018**; however, applications will be evaluated on a rolling basis as they are received. Because space is limited, we encourage you to apply early.

Please contact the instructors to request a large print version of this application.

PERSONAL INFORMATION

Full Name (as appears on passport): _____

Preferred or Nickname: _____

Permanent Address

Street: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Mailing Address (if different from above)

Street: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Other Contact Info (include country code for all non-US phone numbers)

Mobile Phone: _____

Home Phone: _____

Email Address: _____

Secondary Email Address: _____

INTEREST AND BACKGROUND

Please answer the following questions on separate pages and send along with this form.

1. How did you learn of this class?
2. Please share any prior educational experience you feel is relevant to this program. (Note: Beginners are welcome, no prior art experience is necessary!) Please also indicate if you are currently a student and, if so, describe your course of study.
3. What is your primary reason for interest in Drawing as Seeing? What do you hope to gain from the experience?
4. Please share any additional information you'd like us to know about your particular qualifications for or interest in this program.

AFFIRMATION

By signing below, you affirm and agree to the following statement:

I hereby certify that...

- I am over 18 years of age*
- I am physically and mentally fit for independent international travel;
- the information contained in this application form and all supporting documentation is true and complete to the best of my knowledge.

* Exceptions may be made in cases of minors accompanied by parent or guardian.

Signature: _____

Print Name: _____

Date: _____

Please submit your completed application form to DrawingasSeeing@gmail.com no later than **April 1, 2018**. If you are offered a place in the program, a registration form and \$500 deposit will be due by April 15, 2018. **PLEASE DO NOT SEND MONEY WITH THIS APPLICATION.**

For further questions, please contact us via email or call us at +1 (718) 541-0290 (Annie Leist) or +1 (917) 756-5588 (Pamela Lawton)

THANK YOU!