

MFA Application Form

Department of Art & Art History
California State University, Chico
Chico, California 95929-0820

Name: _____
 (Last, First, Middle)

Address: _____
 (Number, Street, City, State, Zip Code)

Telephone Number: _____ Birth Date: _____
 (Area Code, Number) (Month, Day, Year)

Social Security Number: _____ / _____ / _____ Sex: Male Female

Studio Pattern of Interest: Ceramics Glass Design Painting /Drawing Photography Printmaking Sculpture

Previous Education: (Please list in chronological order all schools, colleges, and/or Universities attended.)

Institution: _____ Location: _____ Major: _____ Dates Attended: _____ Degree Received: _____

Personal Achievements (Please list the most significant awards received within the last five [5] years.):

1.	7.
2.	8.
3.	9.
4.	10.
5.	11.
6.	12.

Exhibition Record: (Please list the most significant exhibitions participated in within the last five [5] years.)

1.	7.
2.	8.
3.	9.
4.	10.
5.	11.
6.	12.