

Fill Out Completely

Student Name (First and Last) _____ Date of Birth (Month / Day / Year) _____

Age as of September 2027 _____ Grade Level in Fall 2027 _____

Street Address / Apt. # / City / State / Zip _____

Parent//Guardian Name _____ Phone (Area Code and Number) _____ Email _____

School attending in Fall 2027 _____

Currently enrolled at the Glassell Junior School? ☐ Yes ☐ No

If yes, do you have a scholarship? ☐ Yes ☐ No

***Good quality jpeg images of 8 to 10 pieces of original student work must be submitted via email at PortfolioApplications@mfah.org along with the application.**