

*Fill Out Completely*

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Student Name (First and Last)

Date of Birth (Month / Day / Year)

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Age as of September 2025

Grade Level in Fall 2025

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

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Parent/Guardian Name

Phone (Area Code and Number)

Email

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School attending in Fall 2025

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@mfa.org](mailto:PortfolioApplications@mfa.org) along with the application.**