
APPLICATION for PROGRAM ADMISSION

**Paier College of Art
Incorporated**

20 Gorham Avenue
Hamden, Connecticut 06514
(203) 287-3031

(Please do not write in this space)

Date _____
Receipt No. _____
Fee _____

Applying for
entrance in:

Fall _____
Year

Spring _____
Year

Summer _____
Year

Name:

First (please print or type) Middle Last Maiden name (if applicable)

Mailing Address:

No. & Street

City

State

Zip

E-mail Address

Telephone:

(Home) Area Code Number

(Business) Area Code Number

Date of Birth:

Month Day Year Birthplace

Social Security Number

Citizen of:

(Country)

Do you hold a current visa? Yes No

Do you need a student visa? Yes No

If yes, indicate type

Parent/Address:

Mother's Name

Address (if different from yours)

Telephone:

(Home) Area Code Number

(Business) Area Code Number

Parent/Address:

Father's Name

Address (if different from yours)

Telephone:

(Home) Area Code Number

(Business) Area Code Number

Guardian/Address:

Guardian's Name

Address (if different from yours)

Telephone:

(Home) Area Code Number

(Business) Area Code Number

Spouse:

Spouse's Name

Address (if different from yours)

Telephone:

(Home) Area Code Number

(Business) Area Code Number

Major Interest:
(Check one)

Bachelor of Fine Arts Degree in:

- Fine Arts Graphic Design Illustration Interior Design

Associate of Fine Arts Degree in:

- Photography

Diploma in:

- Fine Arts Graphic Design Illustration Interior Design Photography

Certificate in:

- Graphic Production Interior Design Portrait & Figure Painting
 Sharp Focus/Trompe L'Oeil Painting Technical Illustration

Undecided

Please indicate
proposed sources
of funds for your
College expenses:

- Benefits Loans Federal State Self Parents
 Social Security Spouse Rehabilitation Other

_____ (specify)

Education:

High School	_____	City	_____	State	_____
	from		to	Diploma	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dates attended					
If no, please indicate: Equivalency Diploma (GED) <input type="checkbox"/> Yes <input type="checkbox"/> No					

College/Post-Secondary	_____	City	_____	State	_____
	from		to	<input type="checkbox"/> Diploma	<input type="checkbox"/> Degree <input type="checkbox"/> Other
Dates attended					
College/Post-Secondary	_____	City	_____	State	_____
	from		to	<input type="checkbox"/> Diploma	<input type="checkbox"/> Degree <input type="checkbox"/> Other
Dates attended					
College/Post-Secondary	_____	City	_____	State	_____
	from		to	<input type="checkbox"/> Diploma	<input type="checkbox"/> Degree <input type="checkbox"/> Other
Dates attended					

Additional Information

List art-related experience such as work, extracurricular activities, private lessons, projects, exhibitions, etc.

Please indicate the reasons for your choice of study.

Do you need the College's help to locate housing? Yes No. If yes, what kind of accommodations?

Is there anything else you care to tell us about yourself? Yes No.

From what source did you learn of Paier College of Art ?

<input type="checkbox"/> Art teacher	<input type="checkbox"/> Guidance Counselor	<input type="checkbox"/> Catalog	<input type="checkbox"/> Professional Artist		
<input type="checkbox"/> Friend	<input type="checkbox"/> Magazine	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Radio	<input type="checkbox"/> TV	<input type="checkbox"/> Internet
<input type="checkbox"/> Career Day	<input type="checkbox"/> College Fair	<input type="checkbox"/> College Directory	<input type="checkbox"/> Telephone Book		
<input type="checkbox"/> Other	_____				

TO ALL APPLICANTS:

Your application file will be incomplete and will not be considered until you:

1. Complete and submit this application with the \$25 non-refundable application fee.
 2. Submit a transcript of grades from each school/college listed in the application.
 3. Submit one, or more, letter of recommendation from educators, or other professionals who can comment on your creativity and art skills, as well as your academic ability, and other attributes (e.g., character traits, community interests, activities, etc.).
 4. Arrange with the Admissions Office for a personal interview, or if you live too far away, contact us to make alternate arrangements.
 5. At the time of your interview, plan to present (and discuss) a portfolio of recent examples of your best, original art – any medium, any style. Larger, or 3D pieces, should be submitted in slide form.
 6. If applying for a degree program, submit the scores of either the SAT or ACT.
 7. Send the attached Measles/Rubella Immunization Records Request form to the High School, or Post Secondary School, last attended.
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NOTICE:

The information below is optional. The College is required to file this information under the requirements of Title VI of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972 (Higher Education General Information Survey).*

- Non-Resident Alien Black non-Hispanic American Indian or Alaskan Native
 Asian or Pacific Islander Hispanic White non-Hispanic Other
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In consideration of the undertaking by Paier College of Art, Incorporated to process this application, the undersigned agrees that any information furnished to Paier College of Art, Incorporated, at any time and regardless of whether or not the candidate is accepted as a student at Paier College of Art, Incorporated, including all information and materials of any kind received by Paier College of Art, Incorporated from any source, or prepared by anyone at its request, shall be completely confidential and shall not be disclosed to anyone including the undersigned, except that an authorized official of Paier College of Art, Incorporated may in his/her discretion for official purposes, disclose all or any part thereof to such person or persons as he/she may deem advisable.

I hereby apply for admission to Paier College of Art, Incorporated and affirm that, to the best of my knowledge, the information supplied in this application is true.

Your Signature: _____ Date: _____

Parent's (Guardian's) Signature: _____ Date: _____
(if applicant is under legal age)

*Paier College of Art admits students regardless of race, religion, gender, sexual orientation, disability, ethnic or cultural orientation, and age to all the rights, privileges, programs, and activities generally accorded or made available to students of the College. Also, the College does not discriminate on the basis of the above characteristics in the administration of its educational policies, admissions policies, scholarships and loan programs, or any other College-administered programs.

Measles/Rubella Immunization Information

Public Act 89-90 requires that all full-time or matriculated Connecticut college students born after December 31, 1956 provide proof of adequate immunization against measles and rubella (German Measles). Exemptions will be granted only (1) for medical reasons, confirmed by a physician's statement; (2) if you have had measles and/or rubella and have a physician's or health department certificate so stating/laboratory evidence demonstrating immunity must be presented; or (3) if your religious beliefs do not allow you to be vaccinated and you sign a statement to that effect. If you claim a religious or medical exemption and there is an outbreak of measles or rubella on campus, you may be excluded from college activities, including classes and exams.

Student compliance: If you are a full-time student or a part-time student enrolled in a degree, diploma or certificate program and were born after December 31, 1956, you must present proof of adequate immunization against both measles and rubella as explained below. Proof includes such documentation as a medical record, laboratory evidence, a physician's statement, or your high school or post-secondary school health record.

Adequate immunization: MEASLES: All new and re-admitted students born after December 31, 1956 must provide verification of two (2) doses of measles vaccine – one dose administered after January 1969, and on or after the first birthday, and a second dose after January 1, 1980. If two (2) doses of measles vaccine are required, you must wait at least 30 days before the second dose can be administered. RUBELLA: One dose administered after the student's first birthday is considered adequate immunization.

Any student not showing necessary proof of immunization will not be allowed to register.

MEASLES/RUBELLA IMMUNIZATION RECORDS REQUEST

Please print the information requested and sign at the bottom. Then send this form to the

Name: _____
Last First Middle Initial Maiden Name

Address: _____
Street

_____ City State Zip

Social Security Number: _____ Date of Birth: _____

Last term enrolled at prior school _____
Year Fall Spring Summer

I hereby consent to have my immunization records released to Paier College.

Student's signature: _____

*Dear High School/Post Secondary School/or
Physician, please send my immunization records to:*

**Admissions Office
Paier College of Art, Incorporated
20 Gorham Avenue
Hamden, CT 06514-3902**

(or you may send these records by FAX: 203-287-3021)