

**CSSSA Visual Arts Application—2012**

**DEADLINE: February 28, 2012**

**PLEASE PRINT OR TYPE IN BLUE OR BLACK INK ONLY.**

**1. VISUAL ARTS APPLICATION PORTFOLIO**

(If you wish to apply to more than ONE department, you must print and complete the application for that department and submit in a separate envelope.)

You must identify first/major and second/minor choices. For your Major, choose the topic that interests you the most (no previous experience required for any classes). Please give careful consideration to the categories. If you are accepted, your schedule of classes will be based on these choices: First Choice/Major classes meet 4 days per week. Second Choice/Minor classes meet 2 days per week. If you do not identify your choices, classes will be assigned to you and cannot be changed upon your arrival.

*FIRST CHOICE/MAJOR:* ( ) Sculpture ( ) Painting ( ) Ceramics  
( ) Photography\* ( ) Printmaking ( ) Digital Media\*

*SECOND CHOICE/MINOR:* ( ) Sculpture ( ) Painting ( ) Ceramics  
( ) Photography\* ( ) Printmaking ( ) Digital Media\*

Only Accepted Format: ( ) Flashdrive

\* NOTE: the number of spaces for Digital Media and Photography majors is limited. Do not expect to participate in both Photography and Digital Media classes.

**2. STUDENT INFORMATION**

Student First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Address (mailing): \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ California County: \_\_\_\_\_

Email address: \_\_\_\_\_

Date of Birth (use numbers): \_\_\_\_/\_\_\_\_/\_\_\_\_.

**CSSSA Visual Arts Application—2012**

Age: \_\_\_\_\_

Gender: ( ) male ( ) female

Grade Level to be completed as of June 2012: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Student Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**3. PARENT/GUARDIAN INFORMATION**

Parent/Guardian First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Parent/Guardian Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email address: \_\_\_\_\_

**4. SCHOOL INFORMATION**

Current School: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ California County:

\_\_\_\_\_

**5. ATTENDANCE VERIFICATION**

To verify your attendance at a California secondary school, please submit either a current transcript of your academic record, or have your teacher or counselor

**CSSSA Visual Arts Application—2012**

complete the Attendance Verification form (page 11).

**6. RECOMMENDATION INFORMATION**

Please identify two people who will complete the Recommendation Forms on your behalf. These people should be schoolteachers, private instructors, or arts professionals in your chosen subject area. Recommendations may be submitted on school stationery if the recommender prefers that, but they **MUST** be enclosed with this application.

FIRST RECOMMENDATION:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

School (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_

City/County: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country (if outside of US): \_\_\_\_\_

SECOND RECOMMENDATION:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

School (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_

City/County: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country (if outside of US): \_\_\_\_\_

**7. WHERE DID YOU LEARN ABOUT California State Summer School for the Arts?**

Friend  Internet  Poster  Teacher  School Administration

Local Arts Organization  Other (Specify):

**CSSSA Visual Arts Application—2012**

---

**8. CALIFORNIA RESIDENTS ONLY: WHO ARE YOUR LEGISLATIVE REPRESENTATIVES?**

State Senator:

---

State Assembly Member:

---

To determine your legislative representatives, go on the Internet to <http://www.leginfo.ca.gov/yourleg.html>.

**9. DO YOU REQUIRE ANY SPECIAL SERVICES FOR REASON OF A DISABILITY?**

Physical:

- Legally blind/visually impaired
  - Mobility impairment (including orthopedic)
  - Other impairment (please specify):
- 

Communication:

- Speech impairment
- Hearing impairment
- Learning disability

Please describe:

---

---

**10. ETHNIC INFORMATION** This question is voluntary. The California State Summer School for the Arts collects this information to conform to new guidelines from the Federal government. This information will not affect any student's application for admission.

Check one:

- American Indian or Alaska Native

**CSSSA Visual Arts Application—2012**

- Asian
- Black or African-American
- Hispanic
- Native Hawaiian or other Pacific Islander
- White
- Other \_\_\_\_\_

**11. EDUCATIONAL INFORMATION**

How many years have you studied your primary art form?

- (1) In your school: \_\_\_\_\_
- (2) Private study: \_\_\_\_\_

Please describe your education plans beyond high school:

\_\_\_\_\_

If you attended CSSSA previously, please circle the year(s) and indicate department(s):

2008  2009  2010  2011 Department(s):

\_\_\_\_\_

**12. FILING INSTRUCTIONS**

Mail all forms, the assignments for your department, and the application fee by February 28, 2012 to the Department you are applying to at:

California State Summer School for the Arts  
ATTENTION: Visual Arts Department  
P.O. Box 1077  
Sacramento, CA 95812-1077

- You MUST write the Department you are applying to on the outside of the envelope.
- A non-refundable \$20 APPLICATION FEE is required:

**CSSSA Visual Arts Application—2012**

( ) CHECK or MONEY ORDER made payable to "CSSSA"

( ) VISA ( ) MasterCard

Card # \_\_\_\_\_ Expires Mo. \_\_\_\_ Yr. \_\_\_\_

Three to seven digit number found in signature box on back of card: \_\_\_\_\_

**Contact: (916) 229-5160 / (916) 229-5170 (fax) /  
www.application@csssa.org**

**CSSSA Visual Arts Application—2012**  
**California State Summer School for the Arts 2012 Program**  
**RECOMMENDATION FORM**  
**DEADLINE: February 28, 2012**

To the Student: **YOU NEED TO PRINT AND SUBMIT TWO OF THESE FORMS!** Two individual adults need to fill out a recommendation form for you. Please make sure that your two recommendations and all other parts of your application, including the Required Assignments, are submitted in the same envelope by February 28, 2012. Your application cannot be completely processed until ALL REQUIRED FORMS AND RECOMMENDATIONS are received. Teachers may submit written recommendations on school stationery, if they prefer.

**1. STUDENT INFORMATION**

Students please fill in the student information portion of this form before providing it to the individual who will be recommending you.

Student First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

**2. RECOMMENDING ADULT:** (Teacher, private instructor or other recommending adult).

Name of recommending individual:

\_\_\_\_\_

—

Recommender's Address:

Street Address:

\_\_\_\_\_

City:

\_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email Address:

\_\_\_\_\_

**CSSSA Visual Arts Application—2012**

Recommender's Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Subject Taught: \_\_\_\_\_

How many years have you known this student and in what capacity:

---

---

---

Indicate below your evaluation of the applicant:

1. Interest in chosen area:

Below Average  Average  Above Average  Superior

2. Ability in chosen area:

Below Average  Average  Above Average  Superior

3. Character:

Below Average  Average  Above Average  Superior

4. Cooperation:

Below Average  Average  Above Average  Superior

5. Leadership:

Below Average  Average  Above Average  Superior

6. Emotional Maturity:

Below Average  Average  Above Average  Superior

7. Personal Initiative:

Below Average  Average  Above Average  Superior

Additional comments:

---

---

---

---

**CSSSA Visual Arts Application—2012**

---

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
**3. RETURN COMPLETED FORM TO STUDENT** (May be sealed for confidentiality).

**Contact: (916) 229-5160 / (916) 229-5170 (fax) / [www.application@csssa.org](mailto:www.application@csssa.org)**

**CSSSA Visual Arts Application—2012**  
**California State Summer School for the Arts 2012 Program**  
**FINANCIAL AID REQUEST**

Financial aid is restricted to CALIFORNIA RESIDENTS. It is not awarded to students attending for a second summer regardless of department.

**DEADLINE: February 28, 2012**

- This form **must be submitted with the application** if you wish to be considered for financial aid. Your chances of acceptance to CSSSA will not be affected by your financial aid application.
- You **MUST** submit a copy of parent/guardian's 2010 or 2011 (whichever is most recently filed) 1040, 1040A, or 1040EZ tax forms and supplements with this request.
- **DO NOT FILL OUT THIS FORM OR SUBMIT INCOME TAX RETURNS IF YOU ARE NOT APPLYING FOR FINANCIAL AID.**
- THIS APPLICATION MUST BE TYPED OR COMPLETED IN BLUE OR BLACK INK PEN, not pencil.

Student Name:

\_\_\_\_\_

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Street Address:

\_\_\_\_\_

City, State, Zip:

\_\_\_\_\_

Parent/Guardian #1 Name:

\_\_\_\_\_

Business Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Parent/Guardian #2 Name:

\_\_\_\_\_

Business Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

1. Parent(s)/Guardian(s)' current marital status (please check one)

**CSSSA Visual Arts Application—2012**

- ( ) Married. (Report income information for both parents, including step-parent.)
- ( ) Widow/Widower. (Report income information of surviving parent.)
- ( ) Separated/Divorced. (Report income information on parent you lived with during the last twelve months.)

2. State of LEGAL RESIDENCE of parent(s)/guardian(s): \_\_\_\_\_

3. Total size of HOUSEHOLD during 2010-2011 school year including parents/guardians, all dependent children, and other dependents who live with your parents:  
\_\_\_\_\_

4. Parents/Guardians' ADJUSTED GROSS INCOME:

a. Amount earned by Parent/Guardian #1: \_\_\_\_\_

b. Amount earned by Parent/Guardian #2: \_\_\_\_\_

5. Total U.S. INCOME TAX PAID (line 60 from Form 1040; line 11 from Form 1040EZ):

\_\_\_\_\_

6. SOCIAL SECURITY BENEFITS that the entire family received. Omit educational benefits. (Do not report money included in No. 4 above.) You must provide official supporting documentation.

\_\_\_\_\_

7. AFDC welfare benefits received by family. Report total annual amount, not monthly amounts. (Do not report money included in No. 4 above.) You must provide official supporting documentation.

\_\_\_\_\_

8. NON-TAXABLE INCOME. Include untaxed unemployment compensation, interest and dividend exclusion, military, or clergy housing allowances, the untaxed portion of capital gains, income from untaxed municipal bonds, child support, non-taxable retirement pay-outs, and non-educational veteran's benefits. (Do not report money included in No. 4 above.)

\_\_\_\_\_

9. UNREIMBURSED MEDICAL COSTS. Report medical expenses for the family that were not reimbursed. Use the same rules for calculation that the IRS allows, but

**CSSSA Visual Arts Application—2012**

exclude insurance premiums.

---

10. STUDENT'S INCOME. Enter amount earned:

---

11. STUDENT'S NON-TAXABLE INCOME. Enter total amount of untaxed income. (Use same definitions as in No. 8.)

---

12. STUDENT'S SAVINGS. Enter total of checking and savings accounts.

---

13. PARENT'S CASH SAVINGS. Enter total amount of savings and checking accounts.

---

14. HOME VALUE. Enter the current market value of your home, condominium, or mobile home.

---

15. MORTGAGE DEBT. Enter the amount of principal still owed.

---

16. REAL ESTATE AND INVESTMENTS. Enter market value of other real estate, investments, stocks, bonds, certificates of deposit, precious metals, etc.

---

17. INVESTMENT DEBT. Enter amount owed on investments in No. 16.

---

18. BUSINESS OR FARM. Enter the market value of your business or farm. Include inventory.

---

19. BUSINESS/FARM DEBT. Enter the amount of debt owed on business or farm.

**CSSSA Visual Arts Application—2012**

Exclude non-family partner's share of debt.

---

20. Total number of family members who are full-time college students.

---

Mail this form along with your application and materials by February 28, 2012 to:

**California State Summer School for the Arts**  
**Attention: Visual Arts Department**  
**P.O. Box 1077**  
**Sacramento, CA 95812-1077**

**Contact: (916) 229-5160 / (916) 229-5170 (fax) /**  
***www.application@csssa.org***

**CSSSA Visual Arts Application—2012**  
**California State Summer School for the Arts 2012 Program**  
**ATTENDANCE VERIFICATION FORM**

**POSTMARK DEADLINE: February 28, 2012, with completed application**

To the Student: YOU NEED TO PRINT AND SUBMIT THIS FORM, or a transcript.

- A teacher or counselor from your high school must fill out this form for you.
- Please make sure that this form and all other parts of the application are submitted without delay. Your application cannot be completely processed until ALL required forms are received by the California State Summer School for the Arts.

ATTENDANCE VERIFICATION: To verify your attendance at a California secondary school, please submit either a current transcript of your academic record, or have your teacher or counselor complete the following certification:

I certify that \_\_\_\_\_

(student) submitting this application is a bona fide student at:

\_\_\_\_\_ school.

Teacher/Counselor Name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail\* this form along with your application and materials by February 28, 2012 to:

California State Summer School for the Arts  
Attention: Visual Arts Department  
P.O. Box 1077  
Sacramento, CA 95812-1077

\* You MUST write the name of the Department to which you are applying to on the outside of the envelope.

**Contact: (916) 229-5160 / (916) 229-5170 (fax) / [www.application@csssa.org](mailto:www.application@csssa.org)**

**CSSSA Visual Arts Application—2012**

Applicants to the Visual Arts Program must submit completed application and teacher recommendations and the following **REQUIRED ASSIGNMENTS:**

- A. Choose any issue that interests you (something personal, political or social). Use whatever materials, techniques and processes work best to express your views on the chosen issue. Provide an explanation of the work on a separate sheet of paper.

*In this assignment we are looking for your ability to communicate a personal view on a particular issue through a work of art.*

- B. Create an original art piece that reflects who you are. Use appropriate materials and techniques to interpret your idea.

*In this assignment, we will look at how you creatively interpret the problem, and how you make artistic choices.*

- C. Choose a piece of your artwork that you feel best demonstrates your technical skill and understanding of your favorite medium.

*In this assignment, we want to see that you have developed the skills needed to succeed in this advanced program.*

+++++

++++

**RETURNING STUDENTS ONLY:**

Applicants who attended the California State Summer School for the Arts previously must submit in writing a one page essay stating their reasons for wishing to return to the school, and their learning objectives for a second summer. **ALSO NOTE: Assignments A through C MUST be new, original submissions** that show your development and growth since you attended our program. **DO NOT** submit work you created during the previous summer session. The essay and your progress as an artist will be seriously reviewed. All second year applicants must also submit a recommendation by a CSSSA instructor from the department that you attended previously.

+++++

**FOR ALL STUDENTS, PLEASE NOTE:**

- Do not submit class assignments from school! We want to learn about YOUR ideas, and see how YOU solve problems.
- Use different mediums, one of your submissions must be a drawing using a material of your choosing (for example, charcoal, pencil, pastel, etc.)

### **CSSSA Visual Arts Application—2012**

- Submit required application assignments on **USB flashdrives**
- Send no more than three images total, one per assignment. File types must be saved as **.jpg ONLY**. Digital images in formats other than .jpg, and/or on media other than USB flashdrives will not be reviewed.
- Please Note: flashdrives will **NOT** be returned.
- The flashdrive must be clearly labeled with your name and date of birth. Please save your assignments with your first initial and last name followed by the appropriate letter for each of the submissions. For example, John Smith would label his work as follows:

***jsmith\_A.jpg***  
***jsmith\_B.jpg***  
***jsmith\_C.jpg***

- **WORK NOT LABELED WILL NOT BE REVIEWED**
- We do not assume responsibility for the loss or damage of any materials submitted.
- Send your complete application, including labeled USB flashdrive, application form, teacher recommendations, and financial aid request form and documentation, if you are applying for financial aid to:  
California State Summer School for the Arts  
Attn.: Visual Arts Department  
P.O. Box 1077  
Sacramento, CA 95812-1077