

DISTINGUISHED ARTIST AWARD APPLICATION
ART DEPARTMENT

(Return this form with slides and application materials)

NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

EMAIL: _____

INTENDED AREA OF CONCENTRATION: *(Sculpture, Painting, Drawing, Printmaking, Photography, Ceramics, etc.)* _____

HIGH SCHOOL ATTENDED: _____

EXPECTED GRADUATION DATE FROM HIGH SCHOOL _____

NUMBER OF SLIDES INCLUDED WITH APPLICATION: _____

SPECIAL INSTRUCTIONS FOR SLIDES *(if any)*: _____

CHECKLIST FOR APPLICATION: (Check boxes as you fill your envelope)

- PORTFOLIO *(Labeled Slides: Title, Medium, & your name)*
- COMPLETED APPLICATION FORM
- A POSTCARD STAMPED & ADDRESSED TO YOU. *(This will be mailed back to you when we've received your portfolio and application materials.)*
- A SELF ADDRESSED STAMPED RETURN ENVELOPE *(For the return of your application materials and slides.)*

Return Completed Application To:

DAA Coordinator
DePree Art Center & Gallery
Hope College
P.O. Box 9000
Holland MI 49422-9000