

22. Signature of Student

I certify that all information is true and complete to the best of my knowledge. I understand it is my responsibility to provide proof of high school graduation, and I agree to submit my final high school transcript or my official GED scores and all postsecondary transcripts ("Prior Educational Transcripts") in order to complete my application. I understand that admission to The Art Institute of Tucson is contingent upon, among other things, the school's receipt of all Prior Educational Transcripts, satisfaction of all admissions criteria, the school's acceptance of my application, and my signature on and the school's acceptance of the Enrollment Agreement. I authorize all of the schools I have attended to release copies of my Prior Educational Transcripts.

By this application, you: (a) certify that your information on this application is true and complete; (b) agree that we may request a consumer credit report about you from one or more credit reporting agencies; (c) agree that we may ask third parties, governmental agencies and credit reporting agencies to verify information about you; and (d) agree that we may share information with lenders. We will, upon your request, inform you if we requested a consumer report about you and provide you with the name and address of the consumer reporting agency that furnished the report. You understand that you are providing "written instruction" to us under the Fair Credit Reporting Act authorizing us to obtain information from your personal credit file.

Applicant's Name _____

Signature of Applicant _____ Date _____

The Art Institute of Tucson does not discriminate on the basis of race, color, religion, national origin, ancestry, sex, age, sexual orientation, disability, genetic marker, or any other characteristic protected by state, local, or federal law in the administration of any of its educational programs or activities or with respect to admission or employment.



CREATE TOMORROW

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Local: 520.318.2700
www.artinstitutes.edu/tucson

Accredited Member, ACICS

DO NOT WRITE IN THIS AREA

Program Start Date _____

Payment _____

Date Received _____

ADA No. _____

ID No. _____

Source Code _____



CREATE TOMORROW

ADMISSIONS APPLICATION

Name _____
(Last Name) (First Name) (Middle)



1. Name _____
(Last Name) (First Name) (Middle)

2. Social Security Number _____

3. If any of your records are under a name other than the one given above (for example, your maiden name), please list the name(s) below.

(Last Name) (First Name) (Middle)

4. Permanent Address _____
(Street or P.O. Box)

(City) (State/Province) (Zip/Postal Code) (Country)

5. Current Address (if different) _____
(Street or P.O. Box)

(City) (State/Province) (Zip/Postal Code) (Country)

How long do you expect to be living at this address? _____

6. Contact Information () ()
(Home) (Business)

() ()
(Fax) (Cell)

7. Parent/Guardian Information:

Father (Guardian) _____
(Last Name) (First Name) (Middle)

() ()
(Home Phone) (Work Phone)

(Address, if different from yours)

Mother (Guardian) _____
(Last Name) (First Name) (Middle)

() ()
(Home Phone) (Work Phone)

(Address, if different from yours)

8. Spouse (if married) _____
(Last Name) (First Name) (Middle)

9. Is English your primary language? Yes No If no, what is your primary language?

What is your present knowledge of English? (Please check one) Beginning Intermediate Advanced

What is your most recent TOEFL score? _____

Other proof of English proficiency? _____

10. (1) Are you a U.S. citizen? (Please check one) Yes No

(2) If you are not a U.S. Citizen, what is your current immigration status?

I am a permanent resident of the United States. List Alien Registration Number: _____ (provide proof by submitting a copy)

I am a citizen of _____ and my current visa status is _____ (specify type of visa you hold)

I am a citizen of _____ and my intended visa status is _____ (specify type of visa you intend to apply for)

11. The course for which you are applying is:

- Advertising, BA
- Digital Filmmaking & Video Production, BA
- Graphic Design, AAS
- Baking & Pastry, D
- Digital Image Management, D
- Graphic Design, BA
- Baking & Pastry, AAS
- Digital Photography, BA
- Interior Design, BA
- Culinary Arts, D
- Fashion Design, BA
- Media Arts & Animation, BA
- Culinary Arts, AAS
- Fashion Retailing, D
- Web Design & Development, D
- Culinary Arts, BA
- Fashion Marketing, BA
- Web Design & Interactive Communications, D
- Web Design & Interactive Media, BA

The Baking & Pastry and Culinary Arts diploma programs are four 11-week quarters (44 weeks, 55 credits). The AAS degree programs are Six 11-week quarters (66 weeks, 90 credits). The BA degree programs are Twelve 11-week quarters (132 weeks, 180 credits). The Digital Image Management, Fashion Retailing, Web Design & Development, and Web Design & Interactive Communications diploma programs are four 11-week quarters (44 weeks, 48 credits).

12. Check Preferred Quarter Start Date:

- SP I April 4, 2011
- SU II August 18, 2011*
- FA II November 10, 2011*
- SP II May 12, 2011*
- FA I October 3, 2011
- Other _____
- SU I July 11, 2011

* Mid-Quarter start dates

13. Educational Background

(Name of High School where you graduated) (Date of High School Graduation)

Address of High School _____
(Street)

(City) (State) (Zip)

Class Rank (and number of students in class) _____

Cumulative Grade Point Average and Scale _____ If not a High School graduate, date of G.E.D. certificate _____

Or Name of G.E.D. Testing Center _____

City _____ State _____

Educational Testing Scores (recommended, but not required)

S.A.T. _____ A.C.T. _____ T.A.A.S./T.A.K.S. _____ T.A.S.P./T.H.E.A. _____

14. Would you like your transcripts evaluated for transfer credits? Yes No

List all colleges, universities, or other postsecondary schools attended. Applicant is responsible for providing the school with official copies of secondary school and college transcript(s) and, if planning to transfer credits, copies of college catalogs with full course descriptions are also required.

Institution	City/State	Dates Attended	Major	Reason for Leaving	Number of Credits Earned	Degree or Certificate Earned

15. Employment Record: Describe your employment history (including part-time jobs), starting with your current or most recent employer.

Dates From/To	Name, Address of Employer	Position	Salary	Reason for Leaving	Supervisor

16. Do you desire assistance in seeking part-time employment while in school? (Please check one) Yes No

17. List the extracurricular activities in which you have participated (such as honor societies, sports, or community service organizations), including leadership positions you have held. _____

18. How did you hear about The Art Institute of Tucson? _____

19. Have you visited The Art Institute of Tucson? (Please check one) Yes No If yes, date visited: _____

20. When you attend The Art Institute of Tucson, will you:

- apply for school-sponsored housing? desire assistance in finding independent housing?

(The Art Institute of Tucson reserves the right to do a background check on any housing applicant.)

21. Have you ever been convicted of or pled guilty to a crime other than a summary traffic offense? (Please check one)

- Yes No

(Attach a separate sheet if necessary.) If yes, describe in full: _____

