

The Judaic Visual Arts On-Line Mentoring Program For Students Grades 7-12

APPLICATION

ROLLING ADMISSIONS

Email this application along with <u>Rules Governing Mentoring Program</u> to: Julie Braley <u>amguildjudaicart@gmail.com</u> or <u>office@jewishart.org</u> Write "Student Application/Rules" in subject line.				
Student artist's First name:		Last na	ime:	Age:
Grade as of Sept. 2015:				
Parent or guardian:				
Home address:				
City	State		Country	
Home phone:	Mobile phone:			
Student artist's e-mail address:				
Parents' e-mail address:				
Medium of art (sculpture, painting, drawing, jewelry, etc)				

PART ONE

Please answer the following questions in complete sentences. If you use a separate attachment, please include the question with your answer.

- How did you learn of the program?
- Why are you interested in learning how to create Judaic art?
- What distinguishes Judaic art from non Judaic art?

- What is your experience creating Judaic art?
- Discuss your willingness to receive constructive criticism regarding your efforts at creating Judaic art.
- What is your favorite artistic medium? Why?
- What do you hope to accomplish by participating in this program? What is your greatest strength?

PART TWO CANDIDATE'S STATEMENT

In your own words, please take this opportunity to write about yourself.

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Lawrence Mark Schloss, M.A. Program Director, Centerport, N.Y.