



# Student Information

**REGISTRATION INFO**  
(Make copies of all forms for your records)

Student First Name	Last Name	<input type="radio"/> m <input type="radio"/> f
Address		
City	State	Zip
Phone	Date of Birth	E-mail
School Name	Grade in School	
Art Teacher Name	Work Phone	
Parent/Guardian Name	Work Phone	

Registration and Final Payment Deadline is  
**May 19, 2008**

Enrollment is on a first come basis. If you have any questions, please contact:  
**414-847-3330**  
[www.miad.edu/precollege](http://www.miad.edu/precollege)

### CORE FINE ARTS

Choose TWO of the following courses:

- Basic Drawing
- Figure Drawing
- Graphic Design
- Painting
- Photography

\_\_\_\_\_  
Alternate Choice

-OR-

### CORE EXPLORE DESIGN!

- Architecture/Interior Design
- Product Design

### ROOM & BOARD

I will    I will not (check one)  
be staying at MIAD's Residence Hall

Any Roommate Requests?  
\_\_\_\_\_

### COST

Tuition	\$765
Supplies	\$150
Photo Lab Fee	\$30
Room & Board (residents only)	\$565

TOTAL \$ \_\_\_\_\_

### MAJORS

Choose ONE of the following courses:

- Drawing/Printmaking
- Animation
- Figure in Space
- Graphic Design
- Illustration
- Painting
- Photograph
- Architecture + Interior Design
- Product Design

\_\_\_\_\_  
Alternate Choice

### ROOM & BOARD

I will    I will not (check one)  
be staying at MIAD's Residence Hall

Any Roommate Requests?  
\_\_\_\_\_

### COST

Tuition	\$995
Supplies	\$150
Photo Lab Fee	\$45
Room & Board (residents only)	\$805

TOTAL \$ \_\_\_\_\_

(please print)

Last Name, First Name



# Statement of Understanding for Commuting & Residential Students

**PERMISSION FORMS**  
(Make copies of all forms for your records)

### Publicity Release

I give permission for photographs to be taken of my son/daughter and/or their art work in connection with the activities of the MIAD Pre-College Program and its agencies for use in newspapers, on television, in magazine articles, in brochures and in presentations concerning the Program.

X \_\_\_\_\_  
Signature of Parent/Guardian

### Activities Release

I give permission for my son/daughter to participate in all MIAD Pre-College activities, trips and events.

X \_\_\_\_\_  
Signature of Parent/Guardian

### Unclothed Model Release

In addition to the Figure Drawing/Figure Sculpture Classes and Open Figure Drawing Studios (6:30 - 9:30 p.m.), some MAJORS Workshops will be using unclothed models. Because strong figure drawing skills are important in a well rounded portfolio, and serious art students have limited opportunities to draw from the unclothed figure, it is our commitment to provide as many opportunities to develop the student's ability as possible. My son/daughter  **may**  **may not** (check one) attend Figure Drawing Classes, Open Figure Drawing Studio, and/or workshops where unclothed models are present.

X \_\_\_\_\_  
Signature of Parent/Guardian

### Acknowledgement of Pre-College Program Policy

Residential and Commuter students will be dismissed from the program when any of the following have occurred:

Theft of school or other student's property • Abuse of MIAD or Residence Hall equipment • Vandalism of MIAD, Residence Hall, or student property • Possession and/or use of drugs or alcohol, ON or OFF school property • Disorderly conduct • Disruption of class • Any additional violation of Residence Hall, School Policy, or local, state, and federal laws.

In addition, Residential students can incur dismissal for:

Violation of Curfew (11 p.m.) • Departure from the Residence Hall in violation of the release policy • Unauthorized guests at Residence Hall.

This is to certify that I have read the information about the MIAD Pre-College summer program contained in the catalog. I agree to conform to the policies and regulations of Milwaukee Institute of Art & Design. I understand that any violation may result in immediate dismissal from the program with forfeit of all fees, and that parents must pick up residential students within 24 hours of dismissal.

X \_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

(please print)

Last Name, First Name



## Payment

**PAYMENT INFO**  
(Make copies of all forms for your records)

Check (Made payable to MIAD) \$ \_\_\_\_\_  
Amount Enclosed

Visa  Mastercard  American Express \$ \_\_\_\_\_  
Amount Charged

\_\_\_\_\_  
Credit Card # Expiration Date

\_\_\_\_\_  
Cardholder Name as it Appears on the Card (Please Print)

\_\_\_\_\_  
Cardholder's Signature

All Pre-College registrations, except DPI Scholarship applications, must be accompanied by the full tuition amount or \$100 deposit.

Refunds will only be made for cancellations made prior to:  
**May 19, 2008**

### Registration Checklists:

#### CORE FINE ARTS

- Registration, Medical & Housing Forms
- Statement of Understanding
- \$100 Tuition Deposit
- Scholarship Application (due April 14, 2008)
- Current Transcript
- Ten Slides of Student's Best Work
- DPI (free or reduced lunch WI students) Scholarship Application (due May 19, 2008)

#### CORE EXPLORE DESIGN!

- Registration, Medical & Housing Forms
- Teacher's Recommendation
- Statement of Understanding
- \$100 Tuition Deposit
- Scholarship Application (due April 14, 2008)
- Current Transcript
- Student's Essay (1-2 pages, 12pt font, double spaced)
- OR-
- Ten Slides of Student's Best Work
- DPI (free or reduced lunch WI students) Scholarship Application (due May 19, 2008)

#### MAJORS

- Registration Form, Medical & Housing Forms
- Statement of Understanding
- \$100 Tuition Deposit
- Ten Slides of Student's Best Work
- Scholarship Application (due April 14, 2008)
- Current Transcript
- DPI (free or reduced lunch WI students) Scholarship Application (due May 19, 2008)

(please print)

Last Name, First Name



**DEADLINE: APRIL 14, 2008**  
for MAJORS & CORE FINE ARTS Scholarship consideration.  
**DEADLINE: MAY 19, 2008**  
For MAJORS registration without scholarship.

**PORTFOLIO & SCHOLARSHIP**  
(Make copies of all forms for your records)

A complete application package must include the six items listed below. No incomplete applications will be considered.

- Ten slides of student’s original work. All slides **MUST** be marked with your name, media, dimensions and year completed. Slides should be protected in a plastic slide sheet. Include a self-addressed stamped envelope for the return of your slides.

- or -

- Ten images as either JPEG or PDF format placed on a CD. Please label the images 1 through 10. Clearly print your name on CD. Please type an inventory of work with the media, dimensions and year the work was completed.

- Current transcript
- The completed Scholarship Application Form
- Pre-College Registration Form

- Tuition Deposit of \$100 (If we are unable to award a scholarship and the applicant is therefore unable to attend, the tuition deposit will be returned if we are notified prior to May 19, 2008)

- Art Teacher Recommendation (signature)

X \_\_\_\_\_  
As an Art Teacher, would you like information on MIAD’s Pre-College Program mailed to you at home? If so, please fill out your information:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address City State Zip

List slides of original work. Indicate media, dimensions, and title:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

Scholarship applications must be submitted by:

**April 14, 2008**

Applicants will be notified immediately after the selection process has been completed.

Please mail all scholarship information to:

MIAD Pre-College  
Scholarship Committee  
273 East Erie Street  
Milwaukee, WI 53202

(please print)

Last Name, First Name



**DEADLINE: APRIL 14, 2008**  
for CORE EXPLORE DESIGN! Scholarship consideration.

**CORE EXPLORE DESIGN!**  
(Make copies of all forms for your records)

A complete application package must include the six items listed below.  
No incomplete applications will be considered.

- Student's Essay -OR- Ten slides of student's best work.
- Current transcript
- The completed Scholarship Application Form
- Pre-College Registration Form
- Tuition Deposit of \$100 (If we are unable to award a scholarship and the applicant is therefore unable to attend, the tuition deposit will be returned if we are notified prior to May 19, 2008)
- Art Teacher Recommendation (signature)

X \_\_\_\_\_

As an Art Teacher, would you like information on MIAD's Pre-College Program mailed to you at home?  
If so, please fill out your information:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

(please print)

Student's Essay Question (1-2 pages typed, 12pt font double-spaced)

Describe why you would like to attend EXPLORE DESIGN! and what you hope to gain.

\_\_\_\_\_  
Last Name, First Name



# Student Medical Information

**MEDICAL INFO**

(Make copies of all forms for your records)

This form must be filled out by both residential and commuting students.  
This information is confidential and with restricted access.

Students with special needs who are requesting accommodations must contact MIAD's Accommodations Coordinator, Jennifer Crandall, at 414-847-3344. MIAD ensures program accessibility, equal opportunity, and participation in programs, activities, and services to students with disabilities.

Significant Medical History (please check where appropriate):

- No significant medical history
- Congenital heart disease
- Seizures or Epilepsy
- Insect Stings (which?) \_\_\_\_\_
- Allergies (which? Include drug allergies) \_\_\_\_\_
- Other: \_\_\_\_\_
- Diabetes
- Asthma

Special needs, including emotional, psychological, learning disabilities, and physical restrictions:

\_\_\_\_\_  
\_\_\_\_\_

Specific medical condition requiring accommodations in the Residence Hall:

\_\_\_\_\_

Please list the prescriptions or medication you are currently taking.  
Also, indicate reason for taking the medication, frequency, etc:

\_\_\_\_\_  
\_\_\_\_\_

**ALL STUDENTS MUST PROVIDE PROOF OF MEDICAL INSURANCE COVERAGE. PLEASE ATTACH A COPY OF YOUR INSURANCE CARD (FRONT AND BACK) TO THIS FORM**

Name of Medical Insurance Company Policy # or Medical Assistance #

In Case of Emergency  
Parental consent to provide emergency treatment if above student is a minor:

X \_\_\_\_\_  
Signature of Parent/Guardian Date

EMERGENCY CONTACT (if other than parent/guardian).  
In the event of an emergency, parents will be contacted unless otherwise specified.

Name (Please Print) Relationship Phone

Student's/Family's Physician Phone

(please print)

Last Name, First Name



**OFFICE USE ONLY**  
 Date: \_\_\_\_\_  
 Day: \_\_\_\_\_  
 Student: \_\_\_\_\_  
 Other: \_\_\_\_\_

**PERMISSION FOR ABSENCE**  
 (Make copies of all forms for your records)

Permission is required for each absence and a new form must be completed for every absence. This form applies only to excused Residence Hall absences; separate arrangements must be made with the Pre-College faculty to be excused from any scheduled class or studio time. This Permission Form must be faxed to 414-291-8077 to the attention of Tony Nowak, Executive Director of Campus Life, e-mailed to tnowak@miad.edu, or brought to the Residence Hall (222 E. Chicago St.) at least 24 hours in advance of the departure time. Faxes and e-mails for weekend and Monday releases must be sent by Fridays at 2 p.m. Departure before or failure to return, at times INDICATED ON THIS FORM may result in dismissal from the Pre-College program. Permission Forms will only be accepted if they are completed by a parent or guardian. Pre-College students must return by 1 a.m. or be kept by parent or guardian overnight. Admittance to Res Hall will not be allowed after 1 a.m.  
 please print:

I \_\_\_\_\_  
 (parent/guardian name)  
 am/are aware that my/our son/daughter

\_\_\_\_\_ (student name)  
 will be away from MIAD's Residence Hall at the dates & times listed below. I release MIAD from any and all responsibility and liability for my son/daughter during this period.

Departure date: \_\_\_\_\_

Departure time: \_\_\_\_\_

Return date: \_\_\_\_\_

Return time: \_\_\_\_\_

Mode of transport: \_\_\_\_\_

Will be picked up by: \_\_\_\_\_

\_\_\_\_\_  
 Parent/Guardian Signature(s) Date

Residence Hall Coordinator Approval  
 If you have questions regarding an absence, please contact Tony Nowak at 414-847-3240, Fax # 414-291-8077

(please print)

Last Name, First Name



**OFFICE USE ONLY**  
 Date: \_\_\_\_\_  
 Day: \_\_\_\_\_  
 Student: \_\_\_\_\_  
 Other: \_\_\_\_\_

**PERMISSION FOR ABSENCE**  
 (Make copies of all forms for your records)

Permission is required for each absence and a new form must be completed for every absence. This form applies only to excused Residence Hall absences; separate arrangements must be made with the Pre-College faculty to be excused from any scheduled class or studio time. This Permission Form must be faxed to 414-291-8077 to the attention of Tony Nowak, Executive Director of Campus Life, e-mailed to tnowak@miad.edu, or brought to the Residence Hall (222 E. Chicago St.) at least 24 hours in advance of the departure time. Faxes and e-mails for weekend and Monday releases must be sent by Fridays at 2 p.m. Departure before or failure to return, at times INDICATED ON THIS FORM may result in dismissal from the Pre-College program. Permission Forms will only be accepted if they are completed by a parent or guardian. Pre-College students must return by 1 a.m. or be kept by parent or guardian overnight. Admittance to Res Hall will not be allowed after 1 a.m.  
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Departure date: \_\_\_\_\_

Departure time: \_\_\_\_\_

Return date: \_\_\_\_\_

Return time: \_\_\_\_\_

Mode of transport: \_\_\_\_\_

Will be picked up by: \_\_\_\_\_

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Last Name, First Name

