



**APPLICATION for ART EDUCATION INITIAL LICENSURE PROGRAM**

Please refer to the Montserrat College of Art catalog or [www.montserrat.edu](http://www.montserrat.edu) for complete information concerning the Art Education Initial Licensure Program. Print or type your responses to the questions below. Fill out both pages of the application form. Diane Ayott is the Art Education Department Chair. Diane can be reached at [dayott@montserrat.edu](mailto:dayott@montserrat.edu) or 978.921.4242 x 1604.

**Materials necessary to complete the application:**

- Completed application form
- \$20 Non-refundable application fee (for non-Montserrat graduates)
- Statement of intent
- Official academic transcripts
- Portfolio of art work

**Return all materials to the Office of Admissions:**

Office of Admissions  
Art Education Licensure Program  
23 Essex Street  
Beverly, MA 01915

**PERSONAL INFORMATION:**  FEMALE  MALE

NAME \_\_\_\_\_  
FIRST MIDDLE LAST

EMAIL ADDRESS \_\_\_\_\_

PREFERRED MAILING ADDRESS \_\_\_\_\_  
NUMBER AND STREET

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_

ZIP/POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_ ALTERNATE PHONE \_\_\_\_\_

OTHER ADDRESS (IF ANY) \_\_\_\_\_  
NUMBER AND STREET VALID UNTIL

CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_

ZIP/POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SS# \_\_\_\_\_

COUNTRY OF CITIZENSHIP \_\_\_\_\_

**IF NOT A US CITIZEN BUT RESIDING IN THE US, WHAT IS YOUR VISA STATUS?**

PERMANENT RESIDENT  STUDENT VISA F-1  TOURIST VISA  OTHER

ALIEN REGISTRATION NUMBER \_\_\_\_\_

**PROGRAM INFORMATION:**

I AM APPLYING FOR THE FOLLOWING TERM  SEPTEMBER  JANUARY

IN THE FOLLOWING YEA  2011  2012  2013  2014

I PLAN TO ATTEND  FULL-TIME  PART-TIME

**EDUCATION INFORMATION:**

HIGH SCHOOL \_\_\_\_\_ GRADUATION YEAR \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ART TEACHER \_\_\_\_\_

COLLEGE OR UNIVERSITY ATTENDED \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

DATES ATTENDED \_\_\_\_\_ DEGREE EARNED \_\_\_\_\_  
FROM TO

OTHER COLLEGE OR UNIVERSITY ATTENDED \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

DATES ATTENDED \_\_\_\_\_ DEGREE EARNED \_\_\_\_\_  
FROM TO

**Please arrange to have official academic transcripts to forwarded to the Registrar's office**

EMERGENCY CONTACT \_\_\_\_\_

RELATIONSHIP TO YOU \_\_\_\_\_ PHONE \_\_\_\_\_

**ADDITIONAL INFORMATION:** Please, list any extracurricular activities or work experience in which you are currently involved and any honors or awards which you have received since completing your undergraduate degree(s).

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

**STATEMENT OF INTENT:**

Please enclose a statement describing your personal and artistic goals in completing the Art Education Licensure Program.

**I CERTIFY THAT THIS APPLICATION IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE:**

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

If you have any questions, please contact the Art Education Office at (978) 921-4242 X1604 or dayott@montserrat.edu.

Montserrat reserves the right to document any artwork created by enrolled students for the purpose of recruitment, publications, grants, exhibitions, or any other event that furthers the advancement of the college.