APPLICATION FORM
FOR THE DEPARTMENT OF ART
FINE ARTS TALENT SCHOLARSHIP
BRADLEY UNIVERSITY

(Please type or print legibly)

Name ____________________________________________

Address ____________________________________________
(street address)

(city/state/zip) ______________________ telephone) ______________________ (email address)

TRANSFER STUDENT □ YES □ 2-year or □ 4-year institution □ NO

(Name of Institution)

Please indicate which areas of concentration you are considering studying
□ Art Education □ Art History □ Ceramics □ Drawing □ Graphic Design

□ Painting □ Printmaking □ Sculpture □ Photography

Date Received ______________________ Processed by ______________________
Initials ______________________

Application complete □ yes □ no