

Application for Admission to Post-Baccalaureate in Ceramics

This application is for: fall 20						
Name:						
(Last)	(First)	(Middle/Former)				
Preferred Name	Social Security Number (optional)					
Home Address						
(City)	(State)	(Zip Code)				
Mailing Address (if different from home address)						
Telephone:	E-mail:					
Employer:	Cell Phone:					
State of legal residence: If	Virginia, [] city or [] county of resider	nce:				
Has a change in your residence been made in t	the last 12 months? [] yes [] no					
Birth date:	Country of Citizenship	:				
Is English your first language? [] yes [] n	o If not, what is?					
If you are not a U.S. citizen, are you a [] Leg	gal Permanent Resident of the U.S.?					
[] U.S. Visa Holder (Type) [] Other					
Do you have dual citizenship? [] yes [] n	If so, where?					
The following information is requested to assist the Un voluntary and has no bearing on the admission decisio	niversity in complying with federal and state repo n. Please indicate gender and the ethnic group wi	rting regulations. Response is th which you identify:				
[] Male [] Female Are you H	Iispanic or Latino? [] yes [] no					
If you are not Hispanic or Latino, please indica	ate with which racial group or groups you	identify.				
[] American Indian or Alaskan Native	[] Asian [] Black or Africa	in American				
[] Native Hawaiian or Other Pacific Islander	[] White					

Hollins University Graduate Center Box 9603, 7916 Williamson Rd, Roanoke, VA 24020 (540) 362-6575 • Fax: (540) 362-6288 E-mail: hugrad@hollins.edu Web site: www.hollins.edu Institution(s) from which you have received *undergraduate* credits:

Name of institution, period of attendance, and degree or number of credits:

Institution(s) from which you have received graduate credit:

Name of institution, period of attendance, and degree or number of credits:

I have requested that an official transcript of all college level courses be sent to the Graduate Center at Hollins University, Box 9603, 7916 Williamson Rd, Roanoke, VA 24020. [] Yes [] No (Electronic certified copies are acceptable and may be sent to hugrad@hollins.edu.)

If no, explain: ___

List the names, titles, and addresses of three persons whom you have asked to write letters of recommendation. These should be from instructors or others who are familiar with your academic qualifications and/or who can attest to your ability to be successful in the program to which you are applying. Recommendations should be mailed to the Graduate Center at Hollins University, Box 9603, 7916 Williamson Rd, Roanoke, VA 24020 or emailed by the recommender to hugrad@hollins.edu.

On a separate sheet, include a statement of educational objectives (300 to 500 words). This can include an autobiographical letter describing your educational and professional background and your reasons for wanting to participate in this program. Include any additional information you think will aid the committee in reaching a decision.

On a separate sheet, an artist statement should be submitted (300 words).

[] Portfolio, including official copy of transcript(s), 10 to 15 images of work (no more than 5 detail images), image caption sheet including Title, HxWxD, material, firing and date, and resume have been submitted.

[] I wish to apply for financial assistance.

Are you or any of your relatives currently employed by Hollins University? [] yes [] no

If so, please list name(s), department(s) and relationship:

I certify that the information submitted in support of my application is complete and accurate. I understand that inaccurate information may affect my admission and may be grounds for dismissal. I understand that information provided on this application may be sent to the Virginia State Police and other state or federal agencies for reporting purposes.

Signature

Date

Hollins University does not discriminate in admission because of race, color religion age, disability, sexual orientation, veteran status, national or ethnic origin, or genetic information, and maintains a non-discriminatory policy throughout its operation. For more information, contact the director of equity, community, and Title IX coordinator at (540) 362-6588 or johnsontd@hollins.edu.

How did you first hear about this progr	am? \square advertisement	\Box news article	\Box brochure	□ friend	Facebook	
□ Hollins website □ professor/mentor	🗆 current student 🗆 alumna/alumnus		□ other internet source			
□ other source of advertisement or article:						

\$40 processing fee is due upon submission of this application.

Applicant Instructions

Thank you for your interest in the post baccalaureate in ceramics at Hollins University. To ensure timely processing of your application, read and follow the instructions below.

- 1. Indicate on the application the fall term for which you are applying.
- 2. Complete all items on the application form. Type or print legibly.
- 3. A nonrefundable processing fee of \$40, made payable to Hollins University, must accompany this application.
- 4. Request that your undergraduate and any graduate transcripts be sent to:

Hollins University Graduate Center Box 9603, 7916 Williamson Rd, Roanoke, VA 24020

Certified Electronic Copies can be sent to hugrad@hollins.edu.

- 5. Submit a statement of educational objectives how you anticipate the certificate program will be of benefit to you. The statement should be from 300 to 500 words.
- 6. Submit an artist statement of no more than 300 words.
- 7. Submit a current resume.
- 8. Submit a portfolio of relevant work. This portfolio should include a resume, 10 to 15 images of work (no more than 5 detail images, image caption sheet and three letters of reference which speak to potential for success in the program and ability to undertake graduate level study.

Application materials should be mailed to: Hollins University Graduate Center Box 9603, 7916 Williamson Rd, Roanoke, VA 24020 Or e-mailed directly to our office at hugrad@hollins.edu.

The deadline for receipt of all materials is July 31, 2024.

Questions regarding this program or application to this program should be addressed to:

Josh Manning, Director Hollins University Box 9603 7916 Williamson Rd Roanoke, VA 24020 Phone: (540) 362-6575 Fax: (540) 362-6288 E-mail: hugrad@hollins.edu