



**Application for Admission to
Hollins University Certificate in Children's Book Illustration**

This application is for: summer 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 residence: _____

Has a change in your residence been made in the last 12 months? [] yes [] no

Birth date: _____ Country of Citizenship: _____

Is English your first language? [] yes [] no If not, what is? _____

If you are not a U.S. citizen, are you a [] Legal Permanent Resident of the U.S.?

[] U.S. Visa Holder (Type _____) [] Other _____

Do you have dual citizenship? [] yes [] no If so, where? _____

The following information is requested to assist the University in complying with federal and state reporting regulations. Response is voluntary and has no bearing on the admission decision. Please indicate gender and the ethnic group with which you identify:

[] Male [] Female Are you Hispanic or Latino? [] yes [] no

If you are not Hispanic or Latino, please indicate with which racial group or groups you identify.

[] American Indian or Alaskan Native [] Asian [] Black or African American

[] Native Hawaiian or Other Pacific Islander [] White

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 two 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 on his/her letterhead to hugrad@hollins.edu.

Employment, including part-time and summer, in which you have engaged during the past four years.

On a separate sheet, include a statement of educational objectives. 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.

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 sexual orientation, race, color, national or ethnic origin, disability, genetic information, veteran status, marital status, age, political beliefs, religion, and/or pregnancy, childbirth, or related medical conditions, and maintains a nondiscriminatory policy throughout its operation. For more information, contact the Vice President for Student Success, Well-being, and Belonging and Chief Title IX Officer, at (540) 362-6588 or hintontr@hollins.edu.

How did you first hear about this program? advertisement news article brochure friend Facebook

Hollins website professor/mentor current student alumna/alumnus other internet source _____

other _____ source of advertisement or article: _____

Applicant Instructions

Thank you for your interest in the certificate in children's book illustration at Hollins University. To ensure timely processing of your application, read and follow the instructions below.

1. Indicate on the application the summer term for which you are applying.
2. Complete all items on the application form. Type or print legibly.
3. 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.

4. Request that your two letters of recommendation be e-mailed directly to our office at hugrad@hollins.edu. or mailed to:

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

5. Submit a portfolio demonstrating your ability to pursue a graduate certificate in children's book illustration. The portfolio should be submitted digitally and include 6 – 10 pieces for review. Jpgs around 600 X 1000 pixels would be ideal. The portfolio should be submitted online to hugrad@hollins.edu.

The deadline for receipt of all materials is April 15, although circumstances will occasionally allow the admission of a qualified student after the deadline.

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

Graduate Program in Children's Literature
Hollins University
Box 9603, 7916 Williamson Rd.
Roanoke, VA 24020
Phone: (540) 362-6575
Fax: (540) 362-6288
E-mail: hugrad@hollins.edu
<https://www.hollins.edu/programs/certificate-in-childrens-book-illustration/>