

JACKSON HOLE PHOTOGRAPHY WORKSHOP

APPLICATION FORM

Complete the following application and return it to Attn: Michael Sherwin, School of Art and Design, West Virginia University, College of Creative Arts, PO Box 6111, Morgantown, WV 26506-6111

BIOGRAPHICAL INFORMATION

Name (Last, First, Middle Initial): _____

Social Security Number: ____-____-____ WVU ID Number: ____-____-____

Country of Citizenship: _____ Date of Birth: ____/____/____

Citizenship Status: ____ US Citizen ____ Refugee ____ Non-Immigrant/Other

Visa Type: ____ Permanent Resident with Alien Card (Please attach a copy of both sides of the card)

Male ____ Female ____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (____) _____ Evening Phone: (____) _____

Cell Phone: (____) _____ Work Phone: (____) _____

Email Address: _____

Are you applying as a West Virginia Resident? ____ Yes ____ No

If yes, how long have you lived in West Virginia? ____ Years ____ Months (Proof may be required)

Status:

Guest status is available to students wishing to take this program as non-degree students.

Your current status: ____ High School Graduate
____ Currently enrolled in College
____ Completed a BA/BS degree
____ Check here if you previously applied for Guest status at WVU

Ethnic Group: ____ White, Non-Hispanic
____ Black, Non-Hispanic
____ Hispanic
____ Asian/Pacific Islander
____ American Indian or Alaskan Native
____ Race/Ethnicity Unknown

Emergency Contact Name #1: _____ Relationship: _____

Daytime Phone: (____) _____ Cell Phone: (____) _____

Evening Phone: (____) _____

Emergency Contact Name #2: _____ Relationship: _____

Daytime Phone: (____) _____ Cell Phone: (____) _____

Evening Phone: (____) _____

EDUCATIONAL INFORMATION

Current Academic Institution: _____

Address: _____

Academic Status : ___ Freshman ___ Sophomore ___ Junior ___ Senior
 ___ Graduate ___ Other

Major(s)/Minor(s): _____

Dates Attended: _____ Grade Point Average: _____

PLEASE INCLUDE A COPY OF YOUR ACADEMIC TRANSCRIPT(S) (OFFICIAL OR UNOFFICIAL) WITH YOUR APPLICATION

PREVIOUS EDUCATIONAL EXPERIENCE

Name of High School or College	City and State	Dates Attended	Degree Obtained
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_____	_____	_____	_____
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_____	_____	_____	_____
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APPLICANT SIGNATURE

My signature below verifies that all information on this application is correct to the best of my knowledge:

Signature: _____ Date: ____/____/____

PERSONAL STATEMENT

Please comment on your interest in the workshop and what you hope to get out of it.

PHOTOGRAPHIC EXPERIENCE

Please tell me about your experience with photography. Are you familiar with 35mm camera operations? Have you worked in a darkroom before? What kind of experience do you have with Adobe Photoshop software and inkjet printing? (note: photography experience is not necessary)

PAYMENT AGREEMENT

Students are responsible for the cost of tuition for three college credits, and the additional workshop fee of **\$1,700**. The fee covers van rental, and fuel costs, lodging for 10 nights, studio rental, all of our daily excursions, presentations and demos by professional artists working in the field, several group meals, a national park pass, and some photography supplies. Airfare is not included.

Along with this completed application, a **\$500.00** non-refundable deposit is due in order to hold your spot for the workshop. Applications are accepted on a first come, first serve basis with enrollment strictly limited to 12 students.

THE REMAINING WORKSHOP FEE MUST BE PAID IN FULL TWO WEEKS PRIOR TO PROGRAM DEPARTURE.

REFUND POLICY

A student who withdraws, because of a serious illness or death in the family will receive a refund of costs minus program-specific non-refundable costs such as airline ticket. A certificate of inability to participate in the program, from a doctor or funeral home, is necessary in making claims for a refund.

If program withdrawal is for any other reason, the following applies:

- Between **90 days and 60 days** prior to departure = **75%** of program cost minus airfare and other program specific non-refundable costs
- Between **59 days and 30 days** prior to departure = **50%** of program cost minus airfare and other program specific non-refundable costs
- Between **29 days and the day of departure** = **No Refund**

PLEASE NOTE THE FOLLOWING:

- **ALL DEPOSITS ARE NON-REFUNDABLE**
- **ALL STUDENTS WITH FINANCIAL AID ARE REQUIRED TO PAY THE DEPOSIT UPFRONT AND ARE THEN REIMBURSED BY THEIR FINANCIAL AID— NO EXCEPTIONS.**

Upon receipt of written notification, cancellations and refunds will be processed according to the above policy. The refund, if applicable, will be paid within 60 days of the cancellation being received.

Signature: _____ **Date:** ____/____/____

For additional information contact Professor Michael Sherwin at Michael.sherwin@mail.wvu.edu, or 304-293-3839 (office) 304-680-6142 (cell).