

The Albuquerque Museum

OF ART AND HISTORY

LEAD WITH THE ARTS
APPLICATION

NAME: _____

SCHOOL: _____ DATE OF BIRTH: _____

HOME ADDRESS: _____

CITY: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

PARENT OR GUARDIAN NAME: _____

PARENT OR GUARDIAN PHONE: _____

PARENT OR GUARDIAN EMAIL: _____

PLEASE ANSWER FOLLOWING QUESTIONS ON A SEPARATE SHEET OF PAPER (typed please, double spaced.)

- Why is art important to you?
- What are your expectations for the program? What do you hope to gain by participating?
- How do you feel about group projects? Please include any group projects you have participated in.
- What are your thoughts about museums? Describe any experiences you have had in museums.

IN ADDITION, PLEASE INCLUDE ONE LETTER OF SUPPORT FROM A TEACHER, ADVISOR, OR MENTOR (NOT Family Member).

MAIL COMPLETED APPLICATION TO: The Albuquerque Museum, Attn: Elizabeth Becker, 2000 Mountain Road NW, Albuquerque, 87104 or email to ebecker@cabaq.gov by
Tuesday October 1

For application to be complete you must include:

Application Form
Essay Questions
Letter of Support