

New World School of Violin Making

6970 Red Lake Dr, Presque Isle, WI 54557

This application form is only one part of the application process. You must also visit the school and interview with the instructor.

(please print)

PERSONAL

Name (last,first,middle) _____ E-mail _____

Present Address (street) _____ Phone (____) _____

City _____ State _____ Zip _____ Day Phone (____) _____

Mailing Address if different from above _____

City _____ State ____ Zip _____ At least 18 years of age? Yes__ No__

Date Desired: Aug__ Jan__ Legally authorized to attend school in the U.S.? Yes_ No_

Can you with reasonable accommodation, perform the essential elements required of this education?

EDUCATION

High School

(Name) (City) (State) (Yrs. Attended)(Graduate?)
1) _____ Yes__

No__

2) _____ Yes__

No__

College/University

(Name) (City) (State) (Major/Degree)(Graduate?)
1) _____ Yes__

No__

2) _____ Yes__

No__

WORK EXPERIENCE

Employer _____ yr.(s) worked

_____ Job/Duties _____

Employer _____ yr.(s) worked

_____ Job/Duties _____

OTHER

Use additional paper if needed.

1) Describe any formal or informal training in violin making you have had.

2) Describe your musical background.

3) Describe your experience level in woodworking using hand tools.

4) Briefly state your reasons for entering the violin making trade.

5) How do you plan on financing your education?

6) How did you hear about the New World School of Violin Making?

Notice of Nondiscriminatory Policy

The New World School of Violin Making admits students without regard to race, creed, color, religion, sex, age, national origin, disability, veteran status, sexual orientation, marital status, or any other characteristic protected by law, to all rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate in admission of its educational policies, admissions policies other school-administered programs. I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld no information that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts may exclude my being considered for admission.

Signature _____ Date _____

School Use Only:

Application Received By _____ Date _____

Reviewed By _____

Action Taken _____

Has applicant visited the school _____