

Private Lessons Application Form

Personal Information:			
Full Name:	Age:	Grade:	
Email Address:	Phone N	umber:	
Art Experience and Educational Back	kground:		
What specific art techniques and prir What type of artistic work do you wis		to learn?	
What is your main objective for taking [] Personal enjoyment and fun [] Exploring potential art-related careers [] Building a portfolio for college applic [] Starting or enhancing an art-related to [] Other (Please specify):	s ations ousiness	ect one or more)	

Availability: Please list the days and time	s you are available (in your	local time zone).
Time Zone:(Please include City, State, C	ountry if necessary)	
Day	Available Times	
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
•	y schedule changes or cand	ct to scheduling and instructor cellations, we will make our best effort
Signature:	Date:	
Printed Name:(Parent / Guardian if student	 under 18)	
Signature:		

Please email this application form along with 5-10 pieces of your best artwork to Mr. Chris at xpchien@gmail.com.

Feel free to copy and paste the modified form, and make any further adjustments you deem necessary before sending it via email.