AP 2D Design Application

AP 2D Design REGISTRATION & APPROVAL FORM

Please fill out this form and get it signed by Ms. Rosania and submit to Guidance counselor prior to registering for this class.

** PREREQUISTES FOR AP2D - Photography 1 and Photography 2**

Student Name:	Date:	Class of:
Email address:		
Photo 1 teacher:	Grade:	
Photo 2 teacher:	Grade:	
Please list the art classes, in addition to Photo 1 ar	nd 2, which you have taken at	VHS or another high school.
(If you have taken private lessons you may list the	m as well.)	
Do you work on artwork/photography in the sumn	ner?	
If yes, what? If no, are you willing to work on art ir course)		
Are you interested in attending art school or enter what are your future plans?	ring a creative profession? If y	yes, what profession? If no,
In a few sentences, explain why do you want to tal		
Student needs to submit artwork for review prior	to approvalYes	No
(if yes, please email photography work to Ms. Ro	sania: mrosania@nhvweb.ne	<u>et</u>)
Student's signature Date	Ms.Rosania's Signatur	e Date