

United Young Artists Foundation Application 2015-2016

www.uvaf.org/judge application.

PLEASE COMPLETE PAGES 1-2.

TODAY DATE: ____/____/____
(Month / Date/Year)

Photo: **Please attach your photo**

*All Applicants must attach their current (within 6 months) Passport Photo or Profile Photo.

Applicant Name:

Last, First Middle Maiden

Present address:

Number Street City State
Zip

Mailing Address:

City, State Zip code:

Country:

How did you hear about us? _____

What is your subject studied :

What is your interested in subjects:

Phone Number: () ____ - ____

Birth Date: ____/____/____

Current Citizenship Country Name:
(Name all)

Email Address:

Which category are you applying for?

- Visual Arts Performing Arts
 Technology or All Combined

Your Bachelor School Name: _____ Year Grad: _____

Current work:

Main-Phone: (_____) _____

Which is the best way(s) to contact you? by Phone by Email Mail:

Please write us your motivation to be UYAF judge panel :

Please give us your professional contact for your reference:

Phone: (_____) _____ - _____

*Please check the program(s) you are applying for UYAF Judge Panel: (Check all that apply)

UYAF International Competition

Visual Arts Performing Arts Technology(All Combined)

UYAF Dream Tree Scholarship

Age 4-8 Age 9-13 Age 14-18

UYAF Leadership Program

Age 11-13 Age 14-16 Age 17-19

Office Use: