



**REDHOUSE
COLLEGE OF ANIMATION**

**APPLICATION FORM
Classical Animation**

Full Name _____

D.O.B ___ / ___ / 19___ SIN _____ SK HEALTH _____ M F

CURRENT ADDRESS

Street _____ Hm phone _____

City _____ WK phone _____

Postal code _____ Email _____

PERMANENT ADDRESS

Same as above

Street _____ Hm phone _____

City _____ WK phone _____

Postal code _____ Email _____

NEXT OF KIN

Name _____ Relationship to you _____

Street _____ Hm phone _____

City _____ WK phone _____

Postal code _____

HIGH SCHOOL EDUCATION (Optional)

School _____ City _____

Highest grade achieved _____ Last year attended _____

POST SECONDARY EDUCATION (Optional)

School	City	Program	Years	Graduated
				Y / N
				Y / N

I hereby certify the information which I have provided above is correct.

Applicant's signature _____ Date / / 04

Please include a portfolio of 12 - 15 pieces of your artwork (see web site for details).

<p>Redhouse College of Animation 148 Second Avenue North Saskatoon, SK S7K 1L9</p>	<p>Toll free number: 1-877-264-6867 Phone: (306) 668-0013 Fax: (306) 668-0073</p>
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