NEW YORK FILM ACADEMY

BACHELOR OF FINE ARTS APPLICATION

SOUTH BEACH CAMPUS PAGE 1 OF 5

Student's Name				
_	LAST (FAMILY)		FIRST	MIDDLE
Birth Date	/ /		Email Address	
	Month / Day /	Year		
Today's Date				

BFA Application for SOUTH BEACH CAMPUS IMPORTANT: Please indicate program and start date				
BFA Program:	FILMMAKING			
	☐ ACTING FOR FILM			
Start Date:	FALL TERM 2022 (August 2022)			
	SPRING TERM 2023 (January 2023)			
	FALL TERM 2023 (August 2023)			
	SPRING TERM 2024 (January 2024)			

PAYMENT

The application fee is non-refundable. You may pay by check, money order, wire transfer, Zelle or credit card.

U.S. Residents: \$75.00 USD; International Students: \$75.00 USD

If you already applied online and paid the application fee of \$75, please note when payment and online application was submitted:

	1		1		
Month	/	Day	/	Year	

Payment by Check / Money Order / Wire Transfer / Credit Card / Zelle

Attach the check or money order to this form (skip if paying by credit card or Zelle)

Check No.:	
Amount: \$	

Please make your check or money order, in U.S. dollars, payable to: The New York Film Academy, LTD.

Please contact our Bursar's office at bursar@nyfa.edu for any questions.

Details regarding payment schedule will be sent with acceptance notification. For a copy of the NYFA rules and regulations, and the refund policy, please contact the admissions office.

The New York Film Academy reserves the right to dismiss students from programs for poor conduct, poor attendance, lack of preparation, if they present a threat to themselves or others, or if they cause a disruption of any kind.

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SOUTH BEACH CAMPUS PAGE 2 OF 5

1. Student's Name*								
LAST (FAMILY)	FIRS	FIRST			MIDDLE			
2. Maiden/other name(s) you use		Birth Date	Month	/	Dav	1	Voor	
3. Email Address		Social Security Nu			,	/	real	
			(All t	JS appi	licants	mus	provide)	
4. Current Mailing Address - Please be sure this	is as complete as possible							
STREET ADDRESS								
CITY	STATE OR PROVINCE	ZIP/POSTAL CODE	COUNT	RY				
5. Telephone Number	Seconda	ry Number						
6. Gender: Male Female	Other Decline t	o Answer						
7. Pronoun (Optional): please make available to	check more than one option:							
☐ She/Her/Hers ☐ He/Him/His	☐ They/Them/Theirs	☐ Write In:						
8. Gender Identity (Optional): Write In:								
Why Are We Asking? We use demographic data to help urequired to report some data, which provides little flexibility may self-identify or choose not to disclose. 9. Have you served in the United States Military' 10. I request assistance with housing.	in the options provided for sex, race,	and ethnicity. If you would						
11. Check the box that best describes your citize	enship/residency.							
☐ I am a citizen of the United States. (If you	check this box, skip to question	on 15)						
☐ I am a permanent resident of United State	es and a citizen of COUNTRY							
☐ I am an international student and a citizer	n of COUNTRY							
INTERNATIONAL STUDENTS ON	LY —							
12. Do you plan to apply for the F-1 student visa Are you in the US as an F-1 student and plan Will you be in the US in another immigration s	n to transfer your I-20 to NYFA	√.? ☐ Yes ☐	No Certific	ate?	ПΥ	/ ac	□ No	
13. Permanent or foreign mailing address (if differ								
14. What is your native spoken language?								
Contact the International Office at <i>internation</i> without regard to immigration status.	<u>nal<i>@nyfa.edu</i></u> with any quest	ions. Applications fo	or admiss	ion w	ill be	de	cided	

^{*} International students must apply using full name as it appears on your passport.

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EMAIL ADDRESS

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SOUTH BEACH CAMPUS PAGE 3 OF 5

PHONE NUMBERS

Student's NameLAST (FAM	IILY)	FIRST		MIE	DDLE	
15. High School Level - School	ol History					
Your school's CEEB Code* (If applicable)		which you earned High r foreign equivalency	City, state or prov country, if no		Graduation Date (month/year)	
Your school's CEEB Code* (If applicable)		which you earned High r foreign equivalency	City, state or prov country, if no		Graduation Date (month/year)	
*College Board codes are needed whe	en you send score reports to co	ollege. To find your CEEB code, vi	sit: https://collegereadiness.	collegeboard.or	g/k-12-school-code-search	
16. Post-Secondary Level - (I International Students sho			es attended, in chrono	logical order		
1)						
NAME OF COLLEGE OR UNIV	ERSITY			CEEB CODE		
CITY		STATE OR PROVINCE		COUNTRY		
DEGREE RECEIVED (OR EXPI	ECTED)	GRADUATION DATE (Month/Y	'ear)	MAJOR		
2)						
NAME OF COLLEGE OR UNIV	ERSITY			CEEB CODE		
CITY		STATE OR PROVINCE		COUNTRY		
DEGREE RECEIVED (OR EXPI	ECTED)	GRADUATION DATE (Month/Y	'ear)	MAJOR		
☐ I have attended additi	ional schools. (attach o	n separate sheet if necess	sary)			
☐ I am a former student	of New York Film Acad	demy.				
17. Have you ever been subje	ect to serious disciplina	ry action or been dismisse	d from school?	☐ Yes	☐ No	
18. Parent/Guardian Contact	Info					
LAST (FAMILY) NAME		FIRST NAME		REL	ATIONSHIP	
EMAIL ADDRESS				PHO	DNE NUMBERS	
Would you like your Parent/Guardian to also receive correspondence regarding your application, including billing information?						
(Please check one)	Yes					
19. Secondary Emergency Co	ontact Info					
LAST (FAMILY) NAME		FIRST NAME		REL	ATIONSHIP	

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SOUTH BEACH CAMPUS PAGE 4 OF 5 4

Student's Name		
LAST (FAMILY)	FIRST	MIDDLE
20. Do you have any health issues that N	NYFA should be aware of?	Yes (If yes, please describe your health issues below)
Students living with disabilities are encorporate for SB: maylen.dominguez@nyfa.edu;	•	ility Office prior to their program start date. a.edu
HOW DID YOU HEAR ABOUT US? (S	elect <u>one</u> that most applies. Provi	de <u>details</u> in the space available.)
☐ TV/Radio Station	Event/School Fair	Referral
☐ Magazine/Newspaper	Outdoor Advertisement	Search Engine
☐ Social Media Network		NYFA Campus/Location
☐ NYFA Cafe	Other	
	lame of tribe if applicable:	
☐ Black or African American ☐ Other	☐ Native Hawaiian or Other Pacit	
Applicant Signature		
documents that I send to The New York F or duplicated for any purpose. I agree that	Film Academy become the property of tt, if I am admitted to The New York Fil	accurate to the best of my knowledge. I understand that all The New York Film Academy and will not be returned to me m Academy, my admission is contingent upon verification of pletion of all course work prior to enrolling at The New York
	•	ne New York Film Academy reserves the right to use a student's er promotional materials or for educational purposes.
	all admissions criteria, standards of c	or transfer credit, an award of credit by the New York Film ourse work, attendance, and the course of study must have
	stances when NYFA may change the ins	is will be notified immediately and given a full refund of program structional delivery of a program to online due to circumstances d to NYFA.
The New York Film Academy reserves the they present a threat to themselves or other presents are the second of the		ms for poor conduct, poor attendance, lack of preparation, if y kind.
SIGNATURE		DATE (Month /Day /Year)



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Student's Name			
-	LAST (FAMILY)	FIRST	MIDDLE

APPLICANT PORTAL

The Applicant Portal is the place where you will upload all of your admissions requirements, documents, health forms and other initial enrollment materials. You will receive login information upon completion of your application.

To gain access to your account please visit: https://myapp.nyfa.edu.

For admission requirements visit: https://www.nyfa.edu/admissions/admissions-requirements.php.

