



Dessin Design College

www.ddcollegela.com/ddcollege@hotmail.com

500 Shatto Pl. Suite 400 • Los Angeles, CA 90020 • TEL: 213-427-9911 • FAX: 213-427-9909

APPLICATION FOR ADMISSION

PM, CGM, PP, FD & ESL Programs

Date: _____

The information requested on this form, as well as accompanying application materials, will be carefully reviewed by the Admission Committee and therefore should be typed or neatly printed.

* I am applying for the

PM CGM PP FD ESL (IEP)

* I am applying for admission:

Spring Summer Fall Winter (Quarter System)

Please!
Put
Passport
size Photo.

Personal Data

* Name: _____
Last name First name Middle name

* Under what other last name(s) might documents be received?

Preferred Last Name: _____

* Current Mailing Address: _____
street

_____ city state zip

* Permanent Mailing Address: _____
street

_____ city state zip

* Phone Number: _____ E-mail: _____
(This is important for all applicants, particularly international students)

* Country of citizenship or legal permanent residence: _____

* Date of Birth: _____ Place of Birth: _____
Month/Date/Year City, State, Country

If not a U.S. Citizen, specify type of visa if permanent resident, give alien registration number: _____

* Gender: male female

* Marital status: single married divorced widow/widower



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Education

List chronologically all colleges, universities, and high schools attended. Attach a separate sheet if necessary. *Official transcripts from all schools are required for admission.*

* **Name of School:** _____ attended from _____ to _____

Degree /date granted _____

Address: _____

* **Name of School:** _____ attended from _____ to _____

Degree /date granted _____

Address: _____

Emergency Contact

Identify a person who may be contacted in case of an emergency.

* Name: _____
Last name First name Middle name

* Address: _____
Street city state zip

* Relationship to you _____ Phone number: _____

- Did you attach two passport size photos?

Signature of Applicant: _____

Date: _____
Month /Date/ Year