

**Portfolio Review**

**December \_\_\_\_\_, 200\_\_\_\_\_**

Name	Address:  Phone #:
Degree pursued: BA Art ____; BA Pre-Medical Illustration ____; BFA General ____; BFA Drawing & Painting ____; BFA Sculpture & Ceramics ____.  Anticipated graduation date: semester _____ year _____	
Does the student have permission to take Senior Exhibition? (yes, yes with reservations, no) ____ART 4998 (for the BA) during the spring semester of the year ____ or later. ____ART 4999 (for the BFA) during the spring semester of the year ____ or later.	
Recommendations:	
Student signature	Date signed (don't sign this when you turn it in – sign when you receive your results):
Faculty signatures/dates	