

# The Oxbow School - Application for Admission

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PLEASE COMPLETE THE PART 2 APPLICATION BY RETURNING VIA EMAIL TO [ADMISSIONS@OXBOWSCHOOL.ORG](mailto:ADMISSIONS@OXBOWSCHOOL.ORG) OR VIA MAIL TO:

**The Oxbow School**  
**ATTN: ADMISSIONS**  
**530 THIRD STREET**  
**NAPA, CA 94559**

IN ORDER TO COMPLETE YOUR SEMESTER APPLICATION, PLEASE SUBMIT THE FOLLOWING MATERIALS:

- **A SELF-PORTRAIT**

Students must submit a digital image of an original self-portrait (in any medium) via email to [admissions@oxbowschool.org](mailto:admissions@oxbowschool.org)

- **PARENT STATEMENT**

- **STUDENT QUESTIONNAIRE**

- **OFFICIAL HIGH SCHOOL TRANSCRIPT**

In order for a transcript to be official, it must be signed and sent directly to us from your school via mail or email.

- **TWO TEACHER RECOMMENDATIONS**

Teachers may use our teacher recommendation form or write their own letter.

- **ONE 300-WORD ESSAY ON ONE OF THREE SUBJECTS**

1. *"Art is the lie that enables us to realize the truth."* - Pablo Picasso. Choose one artwork that allowed you to realize a truth about yourself and/or the world around you.
2. Choose a contemporary (Post WWII) work of art that you think best reflects a self-portrait of you. Describe.
3. Project yourself 50 years into the future. You have just published your 250 page autobiography. How does the 3rd chapter begin?

Any questions about application requirements or timelines can be directed to [admissions@oxbowschool.org](mailto:admissions@oxbowschool.org).



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## Student Questionnaire

### APPLICANT

DATE: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

LAST NAME: \_\_\_\_\_

PRONOUNS: \_\_\_\_\_

### EDUCATION

CURRENT SCHOOL: \_\_\_\_\_

ART TEACHER'S NAME: \_\_\_\_\_

COUNSELOR/ADVISOR NAME: \_\_\_\_\_

### FAMILY

BRIEFLY DESCRIBE YOUR FAMILY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### WORK + AWARDS

PLEASE DESCRIBE ANY WORK EXPERIENCE, SPECIAL AWARDS, OR ACHIEVEMENTS YOU WOULD LIKE US TO KNOW ABOUT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### ABOUT YOU

HOW DID YOU LEARN ABOUT OXBOW? (PLEASE GIVE SPECIFIC NAMES) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*The Oxbow School prohibits discrimination against any student or applicant because of race (including natural hairstyles), color, religion (including religious dress and grooming practices), national origin, medical condition, physical or mental disability, sex, sexual orientation, ancestry, genetic information/characteristics, gender, gender identity, gender expression, or any other characteristic or activity protected by law. The Oxbow School promotes respect for all people, and will not tolerate harassment based on any of these characteristics.



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## Student Questionnaire (continued)

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WHAT PREVIOUS ART EXPERIENCE DO YOU HAVE AND WHAT DO YOU HOPE TO GAIN FROM THE OXBOW EXPERIENCE? \_\_\_\_\_

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WHAT BOOK HAS HAD A DIRECT IMPACT ON YOUR LIFE? HOW? \_\_\_\_\_

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WHAT ASPECTS OF SCHOOL DO YOU FIND THE MOST REWARDING? WHY? \_\_\_\_\_

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WHAT ASPECTS OF SCHOOL DO YOU FIND THE MOST CHALLENGING? WHY? \_\_\_\_\_

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PLEASE WRITE FIVE WORDS THAT DESCRIBE YOU AS...

1. A PHYSICAL PRESENCE: \_\_\_\_\_

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2. AN EMOTIONAL HUMAN BEING: \_\_\_\_\_

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3. AN INTELLECTUAL AWARENESS: \_\_\_\_\_

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4. A SPIRITUAL BEING: \_\_\_\_\_

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SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



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## Parent Statement

PARENT/GUARDIAN NAME: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

TELL US ABOUT THE STUDENT AND WHAT YOU FEEL ARE THEIR STRENGTHS, INTERESTS, AND GOALS: \_\_\_\_\_

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WHY WOULD YOU LIKE YOUR CHILD TO ATTEND OXBOW? WHAT DO YOU THINK THEY WILL GAIN FROM THIS EXPERIENCE? \_\_\_\_\_

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AS A PARENT/GUARDIAN, WHAT CHALLENGES HAVE YOU ENCOUNTERED WITH YOUR CHILD? \_\_\_\_\_

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IS THERE ANYTHING ELSE THAT WOULD BE HELPFUL FOR US TO KNOW ABOUT YOUR STUDENT TO BEST SUPPORT THEM AT OXBOW? \_\_\_\_\_

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TO WHOM SHOULD THE INVOICE FOR TUITION BE SENT? \_\_\_\_\_

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CELL #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ARE YOU APPLYING FOR FINANCIAL AID?  YES  NO  
(IF YES, PLEASE SUBMIT YOUR FINANCIAL AID APPLICATION MATERIALS)

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

