OSLO FOTO KUNST SKOLE

Passport photo

APPLICATION

FULL NAME: _____

NORWEGIAN SOCIAL SECURITY NUMBER _____

ADRESS _____

_____**COUNTRY**_____

PHONE_____

E- MAIL_____

FORMER EDUCATION_____

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WORKING EXPERIANCE_____

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SOME WORDS ABOUT YOURSELF AND YOUR MOTIVATION FOR STUDYING PHOTOGRAPHY

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WITH THE APPLICATION YOU CAN SEND 5 OF YOUR OWN WORKS (PHOTOS , SKETCHES OR DRAWINGS AND A DESCRIPTION OF THESE, remember to put your name on them)
SEND ONLY PAPER MAX A3 FORMAT (NOT SLIDES OR CD`s)

Work 1: _____

Work 2: _____

Work 3: _____

Work 4: _____

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Work 5: _____

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Send the form, with attached copies of certicicates and your works, to:

OSLO FOTOKUNSTKOLE
WALDEMAR THRANESGATE 84A
0175 OSLO