

Ada Long

Creative Writing Workshop



Student Application

to apply for the Ada Long creative Writing Workshop, follow these steps:

1. Complete this application form.
2. Attach a three- to five-page sample of your creative writing. It can be in any form—poetry, fiction, drama, etc. You must write your name on each page.
3. If you are applying for financial aid, ask your English teacher or high school counselor to attest to your financial need by email to abvines@uab.edu or by mail to the address at the bottom of this form.

Your Name: _____

Home Address: _____

City, State, and Zip code: _____

Home or Cell Phone: _____

e-Mail (if available): _____

High School: _____

Expected High School graduation Year: _____

Your Signature: _____

Parent/Guardian's name: _____

Parent/Guardian's Signature: _____

For additional information, visit www.uab.edu/cas/english/about-us/events-and-series/ada-long-creative-writing-workshop.
You can also contact Adam Vines at (205) 422-6899 or abvines@uab.edu.

Send application materials to:

Adam Vines, Director

Ada Long Creative Writing Workshop

UAB Department of English

University Hall, Room 5024

1720 2nd Avenue South

Birmingham, AL 35294-1241

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Elective College Credit Application

Complete and return form to the address below:

Adam Vines, Director
Ada Long Writing Workshop
UAB Department of English
University Hall,
Room 5024
1720 2nd Avenue South
Birmingham, AL 35294-1241

I wish to receive college credit for my participation in the workshop.

(check one) ☐ Yes ☐ No

Note: Financial aid awarded by the workshop will not cover the costs for college credit. You will be billed directly by the UAB Office of Student Accounting for tuition and fees.

Complete all of the following information (please print):

Name: _____
Last First M.

Intended Major: _____

Date of Birth: _____

Country of Birth: _____

Country of citizenship: _____

Please check one:

☐ U.S. citizen (if you are a U.S. citizen and were not born in the U.S., supporting documentation is required.)

☐ Permanent resident (please provide a copy of both sides of your resident alien card.)

☐ International visa type: _____

By my signature, I verify that the information on this form is complete and true. I agree to abide by UAB's tuition payment and withdrawal policies.

Signature _____ date _____