



VLAFF YOUTH JURY 2015 APPLICATION FORM

Name: _____

Email: _____

Phone: _____

Age: _____

Language(s): _____

EDUCATION

School: _____

Program: _____

Graduation Year: _____

BEING PART OF THE YOUTH JURY

Can you make a commitment to attend the film screenings (approximately 10) required for making an informed selection of the winning film? _____

Tell us about yourself and why you would like to be part of the VLAFF Youth Jury (in 150 words Maximum). You may attach your resume as supporting material.

Along with this application form, please submit a 500-word review on ONE LATIN AMERICAN FILM of your choice.

Please name your files as follows:

Application form: *your_name_Youth_Jury_VLAFF2015*

Film Review: *your_name_film_review_Youth_Jury_VLAFF2015*

Application deadline: Monday, June 15, 2015.