

# Art on the Farm: Student Questionnaire Page 1

This questionnaire must be completed and returned to Cow House Studios by May 1st, 2018.

Cow House Studios,  
Ballybawn, Rathnure, Enniscorthy,  
Co. Wexford, Ireland

**Student Name:** \_\_\_\_\_

## Art

What is your favorite way of making art (photo, painting, drawing, etc)?

What is the most memorable art project you ever worked on? \_\_\_\_\_

What kind of art do you like? Name few artists. \_\_\_\_\_

What are you most looking forward to learning at the Cow House this summer? \_\_\_\_\_

What drawing materials do you like to use? \_\_\_\_\_

Have you taken life drawing classes? When? \_\_\_\_\_

Have you ever used oil paint? \_\_\_\_\_

Or acrylic paint? \_\_\_\_\_ Water colors? \_\_\_\_\_

Are you interested in working on a portfolio this summer? For any college/ university in particular? \_\_\_\_\_

## Computer and Camera Experience

Do you use a mac or a pc? \_\_\_\_\_

Have you ever used Adobe Photoshop? \_\_\_\_\_

Final Cut Pro? \_\_\_\_\_ iMovie? \_\_\_\_\_

Are there any other kinds of software you use to make art? \_\_\_\_\_

Will you be bringing your own camera this summer? What brand? What model? \_\_\_\_\_

Have you ever used a manual film camera before? If yes, when? How often? \_\_\_\_\_

Have you ever printed in a darkroom? If yes, describe your previous experience. \_\_\_\_\_



# Art on the Farm: Student Questionnaire Page 2

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## Food

What are your favorite foods? \_\_\_\_\_

What are your least favorite foods? \_\_\_\_\_

On a scale of 1 to 10 how adventurous an eater are you? Where 1 is "I know what I like and I like what I know" and 10 is "I'll try anything at least once" \_\_\_\_\_

Do you like spicy food? \_\_\_\_\_

Your ideal day of food would include: \_\_\_\_\_

for breakfast: \_\_\_\_\_

for lunch: \_\_\_\_\_

for dinner: \_\_\_\_\_

for snacks: \_\_\_\_\_

Do you have any food allergies/ dietary requirements? \_\_\_\_\_

Are you vegetarian or vegan? \_\_\_\_\_

## Fun

What are you most excited about this summer? \_\_\_\_\_

What recreational activities do you enjoy? \_\_\_\_\_

What's your favorite movie/s \_\_\_\_\_

What's your favorite bands/ music? \_\_\_\_\_

Do you play any sports? \_\_\_\_\_ If yes, which sports? \_\_\_\_\_

Do you enjoy physical recreation? \_\_\_\_\_

Can you swim? \_\_\_\_\_

Can you ride a bicycle? \_\_\_\_\_

## Room Sharing

Have you ever shared a room before? \_\_\_\_\_

How many family members do you live with? \_\_\_\_\_

Have you ever lived away from home before? Where? How Long? \_\_\_\_\_

Do you consider yourself a social or a private person? \_\_\_\_\_

Are you a heavy or a light sleeper? \_\_\_\_\_

Do you have any concerns about sharing a room? \_\_\_\_\_

