

Artist In Residence Program **APPLICATION**

name _____

address _____

city, state, zip, country _____

email _____

phone (*daytime*) _____ (*evening*) _____



Please check all residencies for which you are applying:

- spring 2012 residency (between February 1 and late May)
- summer 2012 residency (between June 1 and late August)
- fall 2012 residency (between September 1 and late November)
- other _____

Preferred duration of residency:

- 4 weeks
- 8 weeks
- 12 weeks
- other _____

Artistic discipline(s):

Dates and locations of previous artist residencies:

How did you hear about the SAC residency program?

Application checklist:

- Completed application form
- 10 to 15 jpegs of recent artwork with image list providing titles, dates, media, and dimensions
- Current résumé
- 1-page letter indicating your interest and detailing the work you propose to do during the residency
- Self-addressed, stamped envelope, adequate in size for return of materials

Mail completed materials to:

Residency Committee
Salina Art Center
PO BOX 743
Salina, KS 67402-0743

postmark deadline: 4-30-2011
notification: 7-1-2011

REFERENCES Please list three authorities in your field who are familiar with your work:

name _____ address _____

city, state, zip, country _____

email _____ phone _____

name _____ address _____

city, state, zip, country _____

email _____ phone _____

name _____ address _____

city, state, zip, country _____

email _____ phone _____