

Additional Notes:

RESIDENCY APPLICATION

Artcroft is currently restructuring its Residency Program to incorporate opportunities to offer community programming in our nearby town of Millersburg. We will post specific information in the coming months.

Personal Information

Name:		
Address:		
City:	State:	Zip:
Home Phone:	Work Phone: Fax:	
Email:	Work Friend.	I ux.
Date of Birth:	Place of Birth:	
Creative Discipline:	i lass of Bildi.	
Requested Dates Artcroft offers residencies t	from May 1st to October 31st. Submit	your application 3 months ahead
First Choice:	Second Cho	pice:
responsible for the \$125 per week (Art Supplies and Transportation a Food expenses Personal and Prof	mpletely self-catered, with residents be preparation of their food and the follow offsets costs of utilities and maintenant materials related to creative projects and costs associated with transportation fessional References I and two professional letters of recomplete in the project of the costs and the professional letters of recomplete in the professional letters of the prof	ving: ce)
Name:	Relation	
Phone Number:	Email:	
Additional Notes:		
Name:	Relation	
Phone Number:	Email:	

Name:	Relation	
Phone Number:	Email:	
Additional Notes:		
Name:	Relation	
Phone Number:	Email:	
Additional Notes:		
Work you wish to undertake while at Artcroft		
	ork you wish to make while in Residency at Artcroft.	
	The year work to make while in Residency at Arterent	

Your Working Space Requirements Please list Specific Requirements for Living or Studio Accommodations PLEASE SUBMIT THE FOLLOWING WITH APPLICATION A copy of the completed Application Form Application fee of \$30.00 (cash or check payable to Artcroft for \$30.00) Signed Waiver of Liability (Terms and Conditions below) A copy of your professional resume/curriculum vitae Two or more work samples O Writers: If sending a chapter of a larger work: include a synopsis Artists: Prints, Slides, or digital photos are accepted Proposal for participation in Community Arts Terms and Conditions of Residency · ARTCROFT cannot be held responsi- ARTCROFT takes great care in the handling of documentation but cannot ble or liable for belongings, personal effects, accidents or injuries while in be held responsible for loss or damage of submitted materials. residency ARTCROFT is not responsible or ARTCROFT reserves the absolute liable for the maintenance, upkeep, authority to require any resident to safeguard, care or custody of any depart upon receipt of written notice. creative output including works of art I agree to be bound by the Terms and in any form produced by residents. Conditions of the ARTCROFT Residency Program

Date:

Send Package to...

Signature:

115 East 5th St. Millersburg/Paris, KY 40361