

ARTIST-IN-RESIDENCE APPLICATION

| PERSONAL INFORMATION | |
|---------------------------------|---|
| Name | |
| | |
| | Email |
| Date of Birth | Place of birth |
| PROJECT PROPOSAL | |
| With this application, please s | ubmit a cover letter describing your project, including the intended medium |
| and materials needed. You sh | ould also discuss how you will benefit from this program. |
| Please list the dates and time | s when you would be available to work: |
| REFERENCES | |
| Name | |
| Phone | Email |
| Relationship to applicant | |
| Name | |
| | Email |
| | |
| | |
| Name | |
| Phone | Email |
| Relationship to applicant | |



ADDITIONAL INFORMATION

In addition to your **cover letter** and **list of references**, please submit the following with your application:

- Five (5) digital portfolio pieces, with title, size, medium, and year completed.

| Your most received you may have. | nt resume, including your education | on and experience, an | id any additional skills that | |
|--|--|-----------------------|--|--|
| Mail materials to: OR | HAYC3, P.O. Box 492, Hoosick Falls NY 12090 Portfolio pieces should be sent on a compact disc or flash drive. | | | |
| Email materials to: | contactHAYC3@gmail.com All documents should be clearly | • | -Residence Application PDF whenever possible. | |
| Please be sure to submit all four pieces: the application, a cover letter, your five digital portfolio pieces, and your resume. You will be notified of acceptance by HAYC3 staff within three weeks. Please call 518-686-9050 if you have any questions. | | | | |
| By signing this application, I confirm that the information in this application and any additional submitted materials are true and correct. I also confirm that I have read and understood the project description and I have included all requested materials. | | | | |
| Signature | | | Date | |