

ARTIST-IN-RESIDENCE PROGRAM
APPLICATION FORM

Your name: _____

Address: _____

Email: _____ Phone: _____

When do you wish to start your residency? Check one line and, if you prefer a specific month, circle it.

- March, April, May, or June (deadline January 31)
- June, July, August, or September (deadline April 30)
- September, October, November, or December (deadline July 31)
- December, January, February, or March (deadline October 31)

Desired length of residency (check one box):

- 1 month, full-time
- 1 month, part-time
- 2 months, part-time
- 3 months, part-time

(6-month contract only available to continuing and returning artists-in-residence who have done the 3-month Evaluative Review)

Areas of experience (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Intaglio | <input type="checkbox"/> Alternative Photographic Processes |
| <input type="checkbox"/> Silkscreen | <input type="checkbox"/> Scanning |
| <input type="checkbox"/> Relief Printing | <input type="checkbox"/> Photoshop/Digital Imaging |
| <input type="checkbox"/> Lithography | <input type="checkbox"/> Digital Printing |
| <input type="checkbox"/> Letterpress | <input type="checkbox"/> Video/Sound |
| <input type="checkbox"/> Monoprint | <input type="checkbox"/> Animation |
| <input type="checkbox"/> Photography (film) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Photography (digital) | |

Areas you wish to pursue during your residency (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Intaglio | <input type="checkbox"/> Alternative Photographic Processes |
| <input type="checkbox"/> Silkscreen | <input type="checkbox"/> Scanning |
| <input type="checkbox"/> Relief Printing | <input type="checkbox"/> Photoshop/Digital Imaging |
| <input type="checkbox"/> Lithography | <input type="checkbox"/> Digital Printing |
| <input type="checkbox"/> Letterpress | <input type="checkbox"/> Video/Sound |
| <input type="checkbox"/> Monoprint | <input type="checkbox"/> Animation |
| <input type="checkbox"/> Photography (film) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Photography (digital) | |

In addition to this form, artists applying by mail should include the following material with their application:

- résumé (include detailed information on your previous experience with the media you wish to use at Kala)
- work samples (CD or DVD); maximum 20 images or 10 minutes of video
- image list
- a brief, clear description of what project(s) you want to work on while at Kala
- artist statement
- self-addressed envelope with correct return postage if you need materials returned

Local artists applying through an in-person portfolio review need only submit this form and a résumé.