



Artisan-in-Residence Application



NAME: _____

ADDRESS: _____

E-MAIL: _____ PHONE: _____

WEBSITE: _____

RESIDENCY QUESTIONS:

- Applications are accepted on a rolling basis. Please identify your preferred 3 months and year for residency (give multiple choices in order of preference): _____
- How much time do you envision spending in the studio on a weekly basis? _____
- Do you have prior teaching experience? _____

PLEASE INCLUDE THE FOLLOWING WITH YOUR APPLICATION:

- Resume and Artist's Statement with a brief paragraph describing your creative process
- What do you hope to achieve during your residency?
- List of past teaching experiences.
(Include location, subject matter, age levels taught, and media used)
- Proposal of educational programs that you would like to offer (museum educators can help you to develop ideas further, if needed)
- List of 4 references with contact information (include phone, email, and role played by reference)
- CD with 8 images of your most recent creativity, representative of work you will be doing during residency
- Non-Refundable Application Fee of \$25

Non-Refundable Application Fee of \$25 payable to SHENANDOAH VALLEY DISCOVERY MUSEUM

Circle one: Check VISA Mastercard

Credit card #: _____ CIV code: _____

Driver's License # (for checks only): _____

Signature: _____ EXP. DATE: _____

DEADLINE TO APPLY IS ROLLING!

Questions? Send e-mails or call: mlawson@DiscoveryMuseum.net or 540-722-2020

Mail or Email your completed application to:

Shenandoah Valley Discovery Museum • Mary Braun • mbraun@discoverymuseum.net
19 W. Cork St • Winchester, VA 22601