

1646. RESIDENCY APPLICATION FORM.

PLEASE FILL IN CLEAR HANDWRITING AND RETURN VIA MAIL TO
1646 - BOEKHORSTSTRAAT 125 - 2512CN - DEN HAAG - THE NETHERLANDS

YOUR FULL NAME			
DATE OF BIRTH	NATIONALITY		
ADDRESS, POSTAL CODE AND COUNTRY			
TELEPHONE	E-MAIL		
WEBSITE ADDRESS			

PREFERRED RESIDENCY PERIOD - IF YOU ARE ACCEPTED, EXACT DATES WILL BE DISCUSSED
PLEASE LIST POSSIBLE FIRST, SECOND AND THIRD CHOICE DATES FOR YOUR RESIDENCY

1ST CHOICE - From	To	
2ND CHOICE - From	To	
3RD CHOICE - From	To	

SPECIAL REQUIREMENTS: LIST ANY SPECIAL REQUIREMENTS FOR LIVING ACCOMMODATIONS, WORK SPACE, AND/OR EQUIPMENT THAT YOU MIGHT NEED DURING YOUR RESIDENCY *NOT ALL REQUESTS MIGHT BE SATISFIED*

PLEASE, ON SUBMISSION, ATTACH TO THIS FORM THE FOLLOWING DOCUMENTS

- A RESIDENCY PROPOSAL** *Describe the project on which you intend to work during your residency, one page maximum*
- B CURRENT RESUME / CURRICULUM VITAE**
- C WORK DOCUMENTATION** *Preferably more than five works*

UPON SIGNING THIS APPLICATION, I UNDERSTAND THAT THE RESIDENCY PROGRAM IS INTENDED TO PURSUE PERSONAL CREATIVE WORK. I ALSO UNDERSTAND AND AGREE TO PARTICIPATE AND INTERFACE WITH THE LOCAL ARTS COMMUNITY.

IF SELECTED, I AGREE TO ARRIVE AND DEPART ACCORDING TO THE ASSIGNED RESIDENCY DATES. I FURTHER AGREE TO ABIDE THE RESIDENCY'S GUIDELINES AND POLICIES.

SIGNATURE	DATE
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