



GUEST ARTIST-IN-RESIDENCE APPLICATION

139 North Second Street, Philadelphia, PA 19106, phone: 215-925-3453, fax: 215-925-7774

Email: info@theclaystudio.org

URL: [web:www.theclaystudio.org](http://www.theclaystudio.org)

NAME _____

ADDRESS _____

PHONE Home _____ Work _____

FAX _____

E-MAIL _____

WEBSITE _____

HOW DID YOU HEAR ABOUT THE INTERNATIONAL GUEST ARTIST-IN-RESIDENCE PROGRAM?

LANGUAGE(S) SPOKEN _____

ARE YOU PROFICIENT IN ENGLISH? _____ YES _____ NO

DATES OF INTEREST AND AVAILABILITY

1. _____

2. _____

3. _____

PLEASE CHECK ONE:

_____ THE CLAY STUDIO HAS INVITED ME TO PARTICIPATE IN THE PROGRAM

_____ I HAVE BEEN REQUESTED TO APPLY BY _____

_____ I AM INTERESTED IN BEING CONSIDERED FOR THE PROGRAM

You must include with this application:

Artist's statement, resume, project description, a disc with 10 digital images of recent work, 3 references, and a brief statement describing why you are interested in this residency opportunity here at The Clay Studio. Please visit our website for additional information on digital submissions.

SIGNATURE _____ DATE _____

Please return application to: Guest Artist in Residence Program, The Clay Studio, 139 North Second Street, Philadelphia, PA, 19106.