

## CREATIVE ARTS ARTIST IN RESIDENCE APPLICATION

Name:				
Home Phone://		Cell Phone:	/	
Address:				
City:	State:	Zip:		
Your application for the AIR program shou	uld include t	he following:		
1. Five samples (images, MP3 files, YouTube values two years. Please send them via email as viewed.		•	•	
2. One letter of recommendation from an es	tablished figi	ure in your field.		
3. A brief resume.				
4. A statement of intent explaining what you understood that work changes and evolves.	•	omplish during	your residend	cy. It is
The AIR tuition is \$600				
Cabins with a bathroom are available on a fir	rst-come, first	-serve basis. The	ey cost \$100	extra.
Yes, I'd like a cabin with a bathroom				
Deadline for application is June 1 with a n	otification o	late of June 15.	Please subn	nit these items to
Croative Arts Director Dob Handley dob@	nowfound o	watonna com		