

AIR - APPLICATION FORM

Applicant Details

Applicants Name:	
Residential Address:	
Postal Address:	
Phone:	Mobile:
Email:	Website:
Instagram / Facebook:	Other:
ABN:	Registered for GST: <input type="checkbox"/> yes <input type="checkbox"/> no

Diversity Information

What gender do you identify with:	Female <input type="checkbox"/>	Male <input type="checkbox"/>	Unspecified <input type="checkbox"/>
Are you:	Aboriginal / Torres Strait Islander <input type="checkbox"/>	Non-English Speaking Background <input type="checkbox"/>	

Residency Category

Please indicate which AiR Category you are applying for:		
Environment Futures (Funded) <input type="checkbox"/>	Space and Place (Funded) <input type="checkbox"/>	Open AiR (Non-Funded) <input type="checkbox"/>
Funded AiR program applications close Sunday 11 February 2018 - applications received after this date cannot be considered for the Funded AiR program. Applications for the Open AiR program are accepted all year round with assessment and notifications advised 8 - 10 weeks after submission.		
If unsuccessful for a (Funded) AiR - do you wish to be considered for an Open AiR?	<input type="checkbox"/> yes	<input type="checkbox"/> no

Date Preferences and Duration

What is your preferred length of time for the AiR? (minimum is 2 weeks and maximum length of time is 12 weeks)		
Please indicate date preferences:		
Preference #1:	Preference #2:	Preference #3:

Referees

Name and contact details of two professionals in your field familiar with your practice		
Name 1:	Position:	Email: Phone:
Name 2:	Position:	Email: Phone:

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Residency Proposal

In the space provided briefly describe what you propose to do during the residency and why - outlining the benefit of the residency to either your professional development or the successful realisation of your project (or both) and how your proposal engages with community or place. (3000 Character word limit)

Please outline any special requirements for using the studio space: (350 Character word limit)

Arts Practice

Please describe your practice (and number of years in your practice) in the space provided: (800 Character word limit)

Are you currently enrolled at an educational institution?

yes no

If so, what is the institution and year level:

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SUPPORT MATERIAL

Please include examples of your artistic practice, this could include writing, images, sound, video, or anything else that you consider best represents your practice. Support material should be provided as weblinks, digital attachments or on a USB drive for hard copy applications. Please note the following limits:

- **IMAGES:** up to five images of recent works in JPEG format (please include image titles/descriptions – no larger than 1MB per file)
- **CV:** limit of one A4 page
- **WRITING:** limit of 10 pages, so please choose carefully (maximum file size 1MB)
- **VIDEO:** limit to three minutes of video, it is in your best interest to guide us to a video that has been edited to show your work to its best advantage (video must be submitted via a weblink to a media platform)
- **AUDIO:** limit to three minutes of audio. (Audio can be submitted via a weblink to a media platform or attached as an MP3 format and no larger than 1MB)

Please note:

- If applying via email (total email size limit with all attachments should not exceed 10MB). For larger files please use a web based file transfer system such as 'Hightail'.
- If applying via post please provide digital versions of all material on a USB drive.
- If you do not provide the necessary material your application may not be assessed. Excess support material will not be considered.
- DO NOT send original artwork with your application as forms and attachments will NOT be returned
- Retain a copy of your completed AiR Application for your own records

Application Checklist (Please Tick)	
<input type="checkbox"/>	Completed Application Form
<input type="checkbox"/>	Support material included (see above for accepted formats and limits)
<input type="checkbox"/>	One page CV attached
<input type="checkbox"/>	I have nominated the AiR Category and Date Preferences I am applying for on the Application Form

Would you like to subscribe to the NRCG e-newsletter? yes no

DECLARATION

I certify that, to the best of my knowledge, all the information in this application is correct. I acknowledge that Northern Rivers Community Gallery has the right to withdraw the offer of a Residency if it is discovered that any of the information provided is false or misleading.

I understand that the material provided may be used for promotional purposes should my application be successful.

Name (PRINTED): _____

Applicant Signature: _____

Date: _____