Points International Residency Application Form

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| Full Name |  |
| Gender |  |
| Date of birth |  |
| Country of Residence |  |
| Address and Postcode |  |
| Contact Number |  |
| Email Address |  |
| Website |  |
| Emergency Contact |  |
| Preferred period of residency (Please also specify how many days – min 30 days, max 180 days) |  |
| How did you find out about this programme? |  |
| Other residencies attended |  |
| Primary medium of work, artistic practice |  |
| List of required materials, assistance, and equipment |  |
| Artist Statement |  |
| Brief outline of your reasons for applying - your proposed project (Also attach a more detailed proposal if desired) |  |