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| **Kinosaki International Arts Center　Artist in Residence Program 2017****Application Form** |
| **Application date** | YYYY 　 /MM　　/DD  | Attach a portrait photograph here. |
| **Name of registrant** |  |
| **Group name (if applicable)** |  |
| **Name of representative** |  |
| **Date of birth (of representative)** |  |
| **Nationality (of representative）** |  |
| **Address** |  |
| **TEL** |  | **FAX** |  |
| **E-mail** |  | **Website** |  |
| **Genre** | Please tick your genreTheatre　／　Dance　／　Music　／　Other　（　　　　　　　　　　　） |

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| **Background (of representative)** |
| **Year / Month** | **Insert educational background, degrees, artistic background /works/activities etc** |
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| **Your artist statement and self-introduction (Please briefly write in around 250 words)** |
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| **Details of the project you`re applying for** |
| **Title of project** |  |
| **Outline of project (Please briefly explain in around 250 words)** |
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| **Reason for application (Please briefly explain the reason you are applying in around 250 words)** |
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| **Preferences for dates of stay** |
| Preferences 1 | YYYY　　 /MM　　 /DD  | ～ | YYYY　　 /MM　　 /DD  |
| Preferences 2 | YYYY　　 /MM　　 /DD  | ～ | YYYY　　 /MM　　 /DD  |
| Preferences 3 | YYYY　　 /MM　　 /DD  | ～ | YYYY　　 /MM　　 /DD  |
| **Schedule of activities during stay (Please briefly write in around 250 words)** |
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| **Schedule of activities during stay (for preference 1)** |
| **Date** | **Plan** |
| MM　 /DD ～MM　 /DD  |  |
| MM　 /DD ～MM　 /DD  |  |
| MM　 /DD ～MM　 /DD  |  |
| MM　 /DD ～MM　 /DD  |  |
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| **Local Area Exchange Program** |
| **Please choose from the following Local Area Exchange Programs (possible to pick multiple）** |
| □ | Open rehearsal, performance | Invite the public to a performance during your stay |
| □ | Artist talk show | Invite the public to a talk show |
| □ | Open studio | The public can freely view rehearsals during your stay |
| □ | Workshop | Hold a workshop in KIAC for the public |
| □ | Outreach | Participate in a visitation and exchange program with schools or welfare facilities |
| □ | Chat cafe | Invite the public to come and chat with the artists |
| □ | Others | A program not listed above |
| **Please write the plan of a Local Area Exchange Program** |
| Date |  |
| Venue |  |
| Target |  |
| Details |  |

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| **Use of facilities during your stay** |
| **No. of people** | 　　　　　　people |
| **List of members （Please write the names of ALL members planning to stay／please state who is the representative ）** |
| **Name** | **Gender** | **Position** | **Name** | **Gender** | **Position** |
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| **Planned use of hall、studio、residence (http://kiac.jp/wp/wp-content/uploads/2016/04/hall\_studio.pdf)** |
| **Tick** | **Production space desired** | **Dates of use** |
| □ | Hall |  | MM　　 /DD　　 ～MM 　　/DD　　  |
| □ | Studio １ | （39㎡×H3.65m） | MM　　 /DD　　 ～MM　 　/DD　　  |
| □ | Studio ２ | （48㎡×H2.50m／soundproof） | MM　　 /DD　 　～MM　　 /DD　　  |
| □ | Studio ３ | （41㎡×H2.35m） | MM　 　/DD 　　～MM 　　/DD　　  |
| □ | Studio ４ | （61㎡×H2.35m／mirror, ballet bar） | MM　　 /DD　　 ～MM　 　/DD　　  |
| □ | Studio ５ | （55㎡×H3.25m） | MM 　　/DD　 　～MM　　 /DD　 　 |
| □ | Studio ６ | （27㎡×H3.25m） | MM　 　/DD 　　～MM　 　/DD 　　 |
| **Tick** | **Residences desired** | **Names of members to stay** |
| □ | Western Style room A | （Up to 2 people） |  |
| □ | Western Style room B | （Up to 2 people） |  |
| □ | Western Style room C | （Up to 3 people） |  |
| □ | Western Style room D | （Up to 3 people） |  |
| □ | Japanese Style room E | （Up to 4 people） |  |
| □ | Japanese Style room F | （Up to 4 people） |  |
| □ | Japanese Style room G | （Up to 4 people） |  |
| **Using the Arts Center facilities: special requirements** |
| Will you need to manufacture equipment in Kinosaki International Art Center | Yes / No |
| Will you need to store large vehicles, such as trucks for large equipment loads somewhere? (If yes, please state the type of vehicle (s) and size) | Yes / No |
| If you have any other special requirements regarding facility usage please write them here |
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| **Post- stay prospects** |
| **What are your prospective projects/plans after your stay in KIAC? (Please briefly write in 250 words)**  |
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| **Will you hold a performance of your work after your stay in KIAC? (Whether you do, or do not will NOT affect the selection process)** |
| Performance of work | ※Please circle your choiceYes / No / Undecided |
| Title |  |
| Date |  |
| Venue |  |
| (Cast, Staff）ProductionDirectionChoreographyPerformersCoordinatoretc. |  |
| （Credits）SponsorCosponsorSupportetc. |  |
| Details |  |

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| **Reference materials** |
| **Copies of photos of past productions (Up to 4 photos)** |
| Title of production |  |
| Attach photo of production.Please feel free to write a brief explanation of the project. |
| Title of production |  |
| Attach photo of production.Please feel free to write a brief explanation of the project. |
| Title of production |  |
| Attach photo of production.Please feel free to write a brief explanation of the project. |
| Title of production |  |
| Attach photo of production.Please feel free to write a brief explanation of the project. |
| **If you have them, please insert URLs of any videos of your past projects (Youtube link etc)**  |
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