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| **Kinosaki International Arts Center　Artist-In-Residence program 2019-2020**  **Application Form** | | | | |
| **Application date** | YYYY　　 /MM　　 /DD | | | Attach a portrait photo here. |
| **Name of applicant** |  | | |
| **Group name (if applicable)** |  | | |
| **Name of representative** |  | | |
| **Representative’s date of birth** |  | | |
| **Representative’s nationality** |  | | |
| **Address** |  | | | |
| **TEL** |  | **FAX** |  | |
| **E-mail** |  | | | |
| **Website** |  | | | |
| **Genre** | ※Please circle relevant genre (multiple choices allowed)  Theatre　／　Dance　／　Music　／　Other　（　　　　　　　　　　　） | | | |

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| **Representative’s background** | |
| **Year / Month** | **Indicate educational background, earned degrees, artistic background, significant works and activities, awards won, etc.** |
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| **Artist statement and self-introduction (about 200 words)** | |
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| **Project details** | | | | | | |
| **Project title** | | |  | | | |
| **Project outline (about 200 words)** | | | | | | |
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| **Reason(s) for application (about 200 words)** | | | | | | |
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| **Preferred dates of stay** | | | | | | |
| Choice 1 | | YYYY　　 /MM　　 /DD | | ～ | | YYYY　　 /MM　　 /DD |
| Choice 2 | | YYYY　　 /MM　　 /DD | | ～ | | YYYY　　 /MM　　 /DD |
| Choice 3 | | YYYY　　 /MM　　 /DD | | ～ | | YYYY　　 /MM　　 /DD |
| **Intended program during stay (about 200 words)** | | | | | | |
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| **Tentative schedule (based on choice 1)** | | | | | | |
| **Date** | | | **Plan** | | | |
| MM　 /DD ～MM　 /DD | | |  | | | |
| MM　 /DD ～MM　 /DD | | |  | | | |
| MM　 /DD ～MM　 /DD | | |  | | | |
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| **Estimated total budget （including costs for post-residency performances）** | | | | | | |
| Income | ¥ |  | Main source of income | |  | |
| Grant(s) planned to apply | |  | |
| Expenses | ¥ |  | Main source of expenses | |  | |

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| **Local Community Exchange Program** | | | |
| **Choose a Local Community Exchange Program event you would like to organize (multiple choices allowed)** | | | |
| □ | Open rehearsal, performance | | Show the public the result of the work done during your stay |
| □ | Artist talk session | | Talk to the public about your creation process at KIAC, previous works, etc. |
| □ | Open studio | | Invite the public to a rehearsal |
| □ | Workshop | | Hold a workshop at KIAC for the public |
| □ | Outreach | | Hold an interactive event at a school or at a welfare facility |
| □ | Tea-time talk session | | Create an opportunity for artists and locals to discuss together |
| □ | Other | | Another event not listed above |
| **Please give details about the most relevant Local Community Exchange Program event chosen.** | | | |
| Date | |  | |
| Venue | |  | |
| Targeted audience | |  | |
| Details | |  | |

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| **Use of facility during your stay** | | | | | | | | | | |
| **Number of people** | | | | people | | | | | | |
| **List of members （Please write the names of ALL members planning to stay, and please state who is the representative）** | | | | | | | | | | |
| **Name** | | **Gender** | | **Position** | | **Name** | | | **Gender** | **Position** |
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| **Planned use of hall, studios, residence (Facility outline:** [**http://kiac.jp/pdf/overview.pdf**](http://kiac.jp/pdf/overview.pdf) **)** | | | | | | | | | | |
| **Checkbox** | **Production space requested** | | | | | | **Dates of use** | | | |
| □ | Hall | |  | | | | MM　　 /DD　　 ～MM 　　/DD | | | |
| □ | Studio １ | | （39㎡×H3.65m） | | | | MM　　 /DD　　 ～MM　 　/DD | | | |
| □ | Studio ２ | | （48㎡×H2.50m／soundproofed） | | | | 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 | | | |
| **Checkbox** | **Rooms requested** | | | | | | **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） | |  | | | |
| **Special requirements regarding the use of the facility** | | | | | | | | | | |
| Will you need to manufacture equipment at Kinosaki International Arts Center | | | | | | | | Yes / No | | |
| Will you need a space to store large vehicles such as trucks and/or large equipment? (If yes, please state the type of vehicle and the size) | | | | | | | | Yes / No | | |
| Please write below any other special requirement you have regarding the use of the facility | | | | | | | | | | |
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| **Future prospects** | | |
| **How do you plan to develop your project after your stay at KIAC? (about 200 words)** | | |
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| **After your stay, will you be holding a performance of your work done at KIAC? (Whether you do or not will NOT affect the selection process)** | | ※Please circle your answer  Yes / No / To be decided |
| If yes, please fill the information below | | |
| Title |  | |
| Date(s) |  | |
| Venue(s) |  | |
| Cast, staff  (Producer(s), director(s), choreographer(s), performer(s), coordinator(s), etc.) |  | |
| Credits  (Main organizer, co-host(s), sponsor(s), etc.) |  | |
| Details |  | |

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| **Reference material** | |
| **Photos of past productions (Up to 4 projects)** | |
| Title of production |  |
| Attach photo of production.  Please feel free to briefly describe the project. | |
| Title of production |  |
| Attach photo of production.  Please feel free to briefly describe the project. | |
| Title of production |  |
| Attach photo of production.  Please feel free to briefly describe the project. | |
| Title of production |  |
| Attach photo of production.  Please feel free to briefly describe the project. | |
| **If available, please insert URLs linking to videos of your past projects (Youtube link, etc.)** | |
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