

Columbia Gorge Arts in Education

ARTIST RESIDENCY APPLICATION

Please copy this form for each residency. Fill in and mail or fax to the address below.

Questions? *Please call us at 541-387-5031 for assistance.*

Site Information

School _____ Site Coordinator _____

Contact Telephone _____ Fax _____ Email _____

Planning

Type of Residency: Standard Residency Sequential Residency Special Project

Artist Desired:

1st Choice _____ 2nd Choice _____

Number of weeks requested _____

Preferred Residency Dates:

1st Choice _____ 2nd Choice _____

Indicate grade levels and approximate number of students and teachers who will participate in residency:

Grade levels _____ # of students _____ # of teachers _____

List any special groups that will participate (gifted, special needs, ESL, etc.)

What are your goals or desired outcomes for this residency?

Do you plan to have a teacher in-service before or during the residency? *If so, please describe your goals.*

How will this residency support content standards in the Arts (and other subjects, if applicable)?

Will you have teacher's assistants or parent volunteers available for this residency?

If a homestay is required, will you set up accommodations?

Is there anything else the Artist or AIE Coordinator should know in planning this residency?

Site Coordinator's Signature _____ Date _____

Principal's Signature _____ Date _____

Return this form to:

CGAIE • 1009 Eugene Avenue • Hood River, OR 97031 • Fax 541-386-7198