

RESIDENCY APPLICATION

N

narva art residency
joala 18, 20103
narva, estonia
+372 5648 4112
ann.vaikla@artun.ee

nart.ee

• Biographical Information

(We will not share any of your contact information)

First Name:

Last Name:

Email Address:

Phone Number:

Address:

City:

Zip/Postal Code:

Country:

Date of Birth (DD / MM / YYYY):

Website:

(Please point out 2–3 projects that you find relevant for this application, if you don't have a website, please attach a portfolio)

When would you like to begin your residency?

Option 1 (DD / MM / YYYY):

Option 2 (DD / MM / YYYY):

How many weeks would you like to be in residence?:

Please provide a reference (Name of the person, job title, relationship to the applicant, and contact details)

• Application Questions

Primary Art Form/Area of Practise?

Questions of interest in your current artistic practice? (max 250 words)

Ideas about sharing your process / connecting with the local community?
(max 250 words)

Why are you interested in Narva Art Residency / How do you imagine the residency will influence your work? (max 250 words)

How did you hear about this residency programme?

Project description / Plan for the residency? (max 1 page)