



APPLICATION FORM

Surname and Name:

Date of birth:

Country of origin:

Artistic Field (installation, painting, sculpture, video,
etc...):

Website:

E-Mail address:

Preferred Residency Period

_____ 1st of April - 30th of June

_____ 1st of July - 30th of September

_____ 1st of October - 31st of December

Address

Street & House Number.....

Postal code:

City:

Telephone number: