

Movement Research Artist-in-Residence
2012 Application Sheet

Applicant Name and Contact Information

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Work Sample Information

Title _____

Venue _____

Date Performed _____ Duration _____

Collaborators _____

Cue point _____

Work Sample submitted by: *(please check the appropriate box below)*

DVD

URL

For online work samples provide:

URL: _____

Password: *(provide password if online work sample is password protected)* _____

Work Sample Description (150 words or less):