



CAROLINAS HEALTHCARE ARTIST-IN-RESIDENCE APPLICATION

Deadline for Application: Monday, May 3, 2010

One Artist will be selected for either:

Fall 2011 Session -September 6 – November 22, 2011

Or

Winter 2012 Session -January 9 – March 27, 2012

APPLICATION PROCESS

THE CENTER IS UNABLE TO ACCEPT APPLICATIONS VIA EMAIL.

All Artists must submit the following materials. Artists may apply individually or as a Collaborative team, however honorarium, stipend, travel and living accommodations will be shared.

Submit two [2] sets of the following materials. Materials must be 3-hole punched, paper clipped and collated in the order listed below. DO NOT STAPLE. SEND ONLY MATERIALS REQUESTED. ADDITIONAL MATERIALS WILL BE DISCARDED.

1. Artist-In-Residence Application (pg. 3)
2. Image List (see work samples, pg.2)
3. Letter of Intent

Letter should not exceed one [1] page and must include responses to the following questions: 1] A narrative of your proposal for the Carolinas HealthCare project2] How do you perceive your residency experience being enriched in an urban setting with artist / public exchanges encouraged? 3] How will your residency benefit your creative and professional development?

4. Artist Statement

Statement should not exceed one [1] page.

5. Biographical Narrative

Narrative should not exceed one [1] paragraph.

6. Abbreviated Resume, (1) per artist

Resume must include name, address, phone, and email and cannot exceed three [3] pages per artist.

7. Three [3] References

Three[3] references may include other Artists-In-Residence Program Directors, University / College Art Chairs, Gallery Directors or other Art Professionals. The name, address, phone number and email address for each reference must be provided.

I. Work Samples

A. Visual Artists

Painters, Sculptors, Photographers, Printmakers, Installation Artists, etc. must submit examples of work in one [1] of the following two [2] formats:

1. Slides

Submit **NINE [9] SLIDES OF WORK** completed within the last three [3] years in a full 9" x 11" clear plastic sheet. Do not submit glass slides, large transparencies or photographs. In permanent marker, label each slides with the 1] the Artist's Name, 2] Title 3] Top of the slide, indicated with an arrow and 4] Slide Number corresponding to Image List in the top right hand corner of the slide.

In addition, submit **TWO [2] IMAGE LISTS** corresponding to the slides, identifying the 1] Title 2] Date the work was completed 3] Medium 4] Size of work 5] Brief Description, and 5] the Artist's specific role if the piece was produced collaboratively.

2. CD

Submit a **CD with nine [9] JPEG files. Please submit files no smaller than 600 x 800 pixels, 72 resolution and no larger than 1280 x 1024 pixels, 72 resolution.** Each image should be saved as a separate file titled with the artist's name and numbered sequentially. For example: Molly Jone_01, Molly Jones_02. All images must be submitted in RGB color mode; color correction in RGB mode is acceptable. Note that all images will be projected and not reproduced as hard copies for review. Artists who are selected should be prepared to send larger images as needed.

In addition, submit **TWO [2] IMAGE LISTS** corresponding to the slides, identifying the 1] Title 2] Date the work was completed 3] Medium 4] Size of work 5] Brief Description, and 5] the Artist's specific role if the piece was produced collaboratively.

B. New Media and Performing Artists

Film and Video Artists, Experimental Theater, Multimedia/Interdisciplinary Artists, Performance, Sound Artists, etc. must submit examples of work in the following format:

Submit **THREE [3] TO FIVE [5] AUDIO AND/OR VIDEO SAMPLES** of work created in the last three [3] years burned to a CD or DVD. Submit all work on a single CD or DVD. Each piece should be a maximum of two-minutes. International Submissions must play in a Region 1 (NTSC) format.

In addition, submit **TWO [2] IMAGE/WORKSAMPLE LISTS** corresponding to the slides, or CD/DVD identifying the 1] Title 2] Date the work was completed 3] Medium 4] Brief Description, and 5] the Artist's specific role if the piece was produced collaboratively.

II. Optional Materials

3. One [1] Self-Addressed Pre-paid Envelope

Include *only* if you would like the application materials returned to you.

Envelope must have adequate postage. Do not send cash or checks to cover postage.

Carolinas HealthCare Artist-in-Residence Application

Name _____

Medium(s) _____

Career Level

Please select one:

Emerging Artist

Artists in the early stages of their artistic practice. May include those who have completed BFA or MFA programs within the past ten years. Most will not have had numerous exhibitions in galleries or museums and will not yet have work placed in major collections.

Mid-Career Artist

Artists who have been active in their career for more than 10 years. May include those who have been featured in major publications, have had exhibitions in well-known galleries and museums and/or had art placed in major collections. They may also teach visual arts at colleges and universities.

Senior Level Artist

Artists who have an established career in visual arts. Could include those who have been featured in major publications, have had exhibitions in well-known galleries and museums and/or had art placed in major collections. They may also teach visual arts at respected colleges and universities. Most will have had more than twenty years of active studio practice.

Mailing Address

City

State/Province

Zip Code

Country

Home Phone

Cell Phone

Work Phone

Fax

E-Mail Address

Website Address

Statistical Information

Gender

Male ____ Female ____ Date of Birth _____

Race

African American __Asian Pacific __Caucasian __Hispanic/Latino __Other __

How Did You Learn About Us?

Artist-In-Residence Alumni ____ Internet____ Magazine Ad ____ Other ____

Please explain:

Mail application to:
McColl Center for Visual Art
721 North Tryon Street
Charlotte, NC 28202
Attn: Carolinas Health Care Artist-In-Residence Program

Applications due: **Monday, May 3, 2010 at 5:00pm EST**
Applicants notified: **January 2011**

FOR FURTHER INFORMATION

For more information or questions about this program or the application process, contact Claudia Gonzalez-Griffin, Residencies and Exhibitions Associate, McColl Center for Visual Art at: 704-332-5535, ext. 22 or cgriffin@mccollcenter.org.

For information about the Center please visit our website @ www.mccollcenter.org.

DISCLAIMER

Incomplete or late applications will not be accepted. All Applications must be typewritten in English. Items not requested in the application guidelines will be discarded. If an envelope with pre-paid postage is not included, application materials will not be returned. Alumni may re-apply; however artists who have not yet participated in McColl Center for Visual Arts' residency programs will be given priority. Students may apply, but may not be actively enrolled in classes during start of the residency period. All information contained herein does not constitute either an expressed or implied contract and these provisions are subject to change.