

## Workhouse Arts Center Glass Resident Artist Application

Name (print)				
Address				
City	State	Zip_		
Telephone: DayI	Evening			
Email Address				
Glass Education, Training, Expernecessary):	ience or Backgroun	nd (attach addi	tional sheets if	
Areas of Knowledge/Proficiency  Fusing Flame-Working  Other skills (teaching, writing, co	g Elec. Kilns/A	Annealers	Glass casting	Other
Please enclose the following on a above completed Application:	flash drive (or prov	vide a downloa	adable link) with	the
Workhouse Glass Residency 10 images on a flash drive or Image info sheet 2- Letters of Recommendatio Resume or CV Letter of Intent (how would a your Artwork and the Workh Artist Statement Statement of Teaching Philos Signed Glass Residency Guid Send to: Attn: Dale Marhanka; Ce Ceramics Residency Program, 95 703-584-2982 or dalemarhanka@	downloadable (cur on a Glass Residency a ouse Glass Progran sophy (if applicable delines Form eramics and Glass I 18 Workhouse Way	t the Workhoun)  Oirector-Worky-Bldg.8, Lort	use benefit you, thouse Arts Cente	*