**Cheongsong Culture and Tourism Foundation**

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| **Cheongsong International Porcelain Residency Program** **Application form** |
| Applicant | Name(English) |  | Date of birth |  |
| Nationality |  | Contact | Tel. )M. Phone ) |
| Affiliation |  | e-mail |  |
| Address |  |
| Checklist | 1. The submitted documents will not be returned and will be used only for the purpose of judge and will be discarded immediately after the judge.
2. If the contents of the submitted documents are different from the fact, the selection may be invalid.
3. Participants involved in any lawsuit, including plagiarism, will be deselected if the violation is discovered after the selection.
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| Required Documents | 1. Resume or CV (Educations, Awards, Residence participations, Holding Exhibitions, etc.): 1 copy2. Portfolio (Activities including exhibitions, images from 5 up to 15 or video highlights within 3 minutes) 1 copy3. Proposal (activity plan): 1 copy (maximum 200 words in English) 1 copy4. Application form 1 copy 5. Confirmation 1 copy |
| I confirm that I am applying for “2018 Cheongsong International Porcelain Residency Program” as above and submission the above required documents. 2018. . . Applicant (Signature) |

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| **Work Proposal** |
| **Title /****Category** |  |
| **Intention****&****Concept** |  |
| **Guidance:** Describe your plan for the program (no more than 200 words),such as;How are you going to make the residence program useful?What is your plan for artwork activity? What is the history, originality of the pottery you are working on?Why is the Cheongsong White Porcelain Residency Program attractive to you?(The applicants will be evaluated based on their proposal) |

**2018 Cheongsong International Porcelain Residency Program**

**Confirmation**

1. Can you stay independently in Cheongsong from May 17, 2018 to November 16, 2018 ( YES / NO )
2. Do you have any reason to disqualify your trip abroad? ( YES / NO )
3. Do you have any health problems in participating in overseas residency program? ( YES / NO )
4. Are you willing to donate 5 or more works to the subject organization if you participate in this residency program? ( YES / NO )
5. As part of the program, are you willing to participate in academic seminars and open studios during your residency? ( YES / NO )
6. If you are selected as the finalist, will you work and interact with local artists as a representative of the residency program? ( YES / NO )
7. Do you agree that the contents of all documents submitted are true? ( YES / NO )

I confirm that all contents related to the above contents are true and that I will assume all civil and criminal liability to myself if it is proved to be false.

2018. . .

Candidate artist :(Name in Print) (Signature)