

2020 SUMMER INSTITUTE APPLICATION

Session I: SPARKLE PLANET: We have lift-off! July 13 - 24, 2020

Deadline for Applications: Monday, March 30, 2020; 5pm CST

This application is to participate in Plug In ICA's 2020 Summer Institute, Session I: SPARKLE PLANET: We have lift-off! Tau Lewis will facilitate this session, with content to be determined by faculty and participants in a collaborative manner. Participants will be expected to engage from time to time in informal forums, discussions, and activities. This program offers a shared institute environment with some equipment and technical support. The focus will be on ideas and conversations, facilitated in part by faculty, co-participants and others. For more information, please refer to www.plugin.org or contact nasrin@plugin.org. All applications should be submitted to Nasrin Himada at nasrin@plugin.org, by Spm Central Standard time on March 30, 2020.

PREFERRED PRONOUN (OPTIONAL):			
SURNAME	FIRST NAME	INITIAL	
PRESENT ADDRESS	VALID UNTIL (D/M/Y)//		
ADDRESS		CITY	_
PROVINCE/STATE	POSTAL CODE	COUNTRY	_
TELEPHONE	MOBILE PHONE	EMAIL	—

PERMANENT ADDRESS

□ Same as present address or: Provide complete mailing address along with any other relevant contact information.

Plug In ICA	-	<pre>In Institute of Contemporary Art Unit 1 - 460 Portage Avenue Winnipeg, MB, Canada, R3C 0E8 info@plugin.org www.plugin.org</pre>
PERSONAL INFORMATION		
DATE OF BIRTH (D/M/Y) _	//	
	 Post-secondary Vocational college Technical Institute 	
LAST YEAR ENROLLED:		
PROGRAM OF STUDIES:		
LENGTH OF TIME IN PROGR	ZAM:	
OTHER RESIDENCES OR GRO	UP ART PROJECTS PARTICIPAT	'ED IN:
CITIZEN OF: 🛛 Canada	🛛 U.S.A. 🛛 Other:	
APPLICATION MATERIALS		
Please include the foll	owing materials with your	application form:
- Curriculum Vitae/Ar	tistic Résumé	
- One-page project pr	oposal on research to be u	ndertaken (500 words maximum)
- An artist bio (250	words maximum)	
- Up to lO digital im	ages OR 2 writing samples	(word or PDF):
- Format: JPEC	; files only, max 150 DPI r	resolution, 1024 x 768 px.
followed by	in the order you would li your initials, and the yea tials_year_title.jpg)	
-	be uploaded to a file-shari cructions to access the sit	-
	ed image list, including t the work, and any other r	
- Scanned clippings c	f recent reviews, publicat	ions, etc.

(optional, to a maximum of 3)



APPLICANT'S SIGNATURE

I affirm that all the information is complete and accurate, and that any work presented represents the achievement of my creative effort. I certify that the information I have provided is true and complete in all respects. The personal information on this form is collected and maintained as part of a record of application to and/or participation in the Plug In ICA Summer Institute program and will be used for the purposes of admission, registration, sending follow-up educational information, program evaluation materials, and for Plug In Institute of Contemporary Art research and planning.

- □ If accepted, I agree to conduct myself in a manner that meets with the expectations of all program participants.
- If accepted, I hereby give permission to Plug In ICA to:
- □ Share my name, biography and e-mail address with other participants in the program.
- Publicize my name, biography and project information in relation to this program on Plug In's website, publicity material and for other Plug In administrative and promotional purposes.

If different than above, please indicate how you wish your name to appear in publicity:

□ No, I do not wish my name to be publicized.

□ All support material is attached electronically.

SIGNATURE

DATE



EMERGENCY CONTACT INFO

SURNAME	FIRST NAME	INITIAL			
RELATIONSHIP TO PARTICIPANT:					
ADDRESS		CITY			
PROVINCE/STATE	POSTAL CODE	COUNTRY			
TELEPHONE	MOBILE PHONE	EMAIL			