

Artist in Residence Application Form

John Day Fossil Beds
National Monument

National Park Service



Last Name

First Name

Address

E-mail

Phone

Please circle all months in which you could potentially participate in the Artist in Residence Program at John Day Fossil Beds.

Professional
References:

May 2016

June 2016

July 2016

August 2016

September 2016

I would be available for approximately
_____ (length of time)

Artwork examples sent via (circle one of the following):

E-mail attachment

Web link

CD-ROM

Printed copies

I work in the following media (circle all that apply):

Two dimensional

Photography

Three dimensional

Videography

I affirm that I am a US citizen or permanent resident.

X
