Mashiko Museum Residency Program 2019 application form

Name		
Sex	Date of Birth (Year/Month/Day)	
Nationality	Institute	
Contact address		Attach portrait photograph here.
TEL	<u>FAX</u>	
E-mail		
НР		
Personal History *Please outline your ac *Please attach material	cademic history, employment history, main exhil s that will help to give a general understanding o	pitions, history of activities, awards received, etc. of your activities.(pictorial records, pamphlets, etc)
Year		
* Please note the langu	age(s) you can communicate in	
Your intended period	l of stay	
	2019/ /	Until 2019/ / Year / Month / Day)

Please outline the artwork that you intend to work on during your stay.		
Please give a details tin	ne schedule for your work, and the duration of your work.	
Month / Day		
Di I	f I com to AA I to to	
riease state your plans	for exchange activities with Mashiko citizens.	
Please state your reasons for wishing to stay in Mashiko for your artistic creation.		
Please state your plans of the result presentation to perform after returning to your country.		
Please enclose reference le	etter(s).	
Name		
Company/Institute	Position	