

**Mashiko Museum Residency Program 2025****Application Form**

Name

Sex

Date of Birth

(Year/Month/Day)

Nationality

Institute

Contact address

TEL

FAX

E-mail

HP

Attach portrait  
photograph**Personal History**

\* Please outline your academic history, employment history, main exhibitions, history of activities, awards received, etc.

\* Please attach materials that will help to give a general understanding of your activities.(pictorial records, pamphlets, etc)

Year	

\* Please note the language(s) you can communicate in

\* Your intended period of stay

From

2025/ /

(Month / Day)

Until

2025/ /

(Month / Day)

Please outline the artwork that you intend to work on during your stay.

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Please give a details time schedule for your work, and the duration of your work.

Month/ Day	

Please state your plans for exchange activities with Mashiko citizens.

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Please state your reasons for wishing to stay in Mashiko for your artistic creation.

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Please state your plans of the result presentation to perform after returning to your country.

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Please enclose reference letter(s).

Name

Company/Institute

Position