

Residency Application Form

This form should be editable in most web browsers, such as chrome, as well as Adobe PDF Reader. You can save it after filling it out and send it to us via email frenkielponti@gmail.com

NAME	
PRONOUNS	
DATE OF BIRTH	
WEBSITE	
INSTAGRAM	
PHONENUMBER	
YOUR PRACTICE (E.G MUSICIAN, ARTIST PHOTOGRAPHER ETC)	
APPLYING FOR (INSERT MONTH) RESIDENCY	



150 Word Artist Statement

50	Word paragraph on what you will explore during the Frenkiel and Ponti Residency, why this particular residency,
	how it will benefit your Practice & a rough plan for your stay.
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How would you describe yourself? (There 's no right answer!) Is there anything you want us to be aware of, such as Dietary Requirements, Health Requirements, Disabilities etc.



Please email us this form to frenkielponti@gmail.com, attach the following to the email and check the boxes once done
\square I have attached my CV
I have attached (when applicable) a maximum of 4 examples of each:
☐ Pictures of Artwork ☐ PDFs Of Writing ☐ Videos/audios Work ☐ 1 Minutes Of Music

There is no correct work or medium to send us, it only matters what you think is relevant to you and your plan for the residency. Keep in mind we only spend around 5-7 minutes on each applicant.