



## Montgomery County Arts & Cultural District's Performing and Literary Artist Fellowship Program for individual artists

Applications must be typewritten and completed in their entirety. Handwritten or incomplete applications will be eliminated from consideration. Executable applications are available on disk, through email or online at [http://www.mcoho.org/services/ced/art\\_cultural.html](http://www.mcoho.org/services/ced/art_cultural.html). Type must be no smaller than 12 pt. Do not attach additional pages. Application by fax or email will not be accepted. If you have any questions, call the MCACD staff 224-3850.

**Deadline for Submission: SATURDAY, July 17, 2010.**

Applications must be received at the Dayton Visual Arts Center  
118 N. Jefferson Street, Dayton, OH 45402

### GRANT INFORMATION

Check **ONLY** one program category, one artistic focus, and one fellowship category as it applies to this application:

1. Program Category:  Music       Dance       Theatre       Literary       Design
2. Artistic Focus       Interpreter       Creator

### ARTIST INFORMATION

3. \_\_\_\_\_  
Applicant Name  
\_\_\_\_\_  
Email  
\_\_\_\_\_  
Web Address  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City/State/Zip  
\_\_\_\_\_  
Home Telephone  
\_\_\_\_\_  
Alternate Telephone
4. \_\_\_\_\_  
Years as Montgomery County Resident (No.)

## ARTIST STATEMENT

5. Use this space to describe and discuss your vision and development as an artist. Place the artistic documentation submitted into the context of your vision and development. **No Additional Pages!**

## APPLICATION MATERIALS CHECKLIST

Contact the MCACD staff for questions on the application and support materials, 937.224.3850. Please collate copies of your application and support materials into sets by using paperclips or envelopes, but **DO NOT STAPLE OR SEND FOLDERS**. Each applicant is responsible for submitting the following materials:

- (11) Eleven copies (One original and ten copies) of the application form (pages 1 - 3).
- (11) Eleven copies of Artist Resume or Bio.
- (11) Eleven copies (One original and ten copies) each of (2) two **recent** (e.g., written this year) letters of support that address the quality of artist's work and professional activity.
- (11) Eleven copies of the Artistic Documentation Synopsis Sheet. (Appropriately marked for 1<sup>st</sup>/2<sup>nd</sup> readers and for the panel).
- (1) One copy of the appropriate cued artistic documentation. (see guidelines for disk format requirements)

## CERTIFICATION

Please initial in the spaces provided.

1. \_\_\_\_\_ I hereby release MCACD and DVAC and their staff from any liability and/or responsibility concerning the loss of or damage to materials submitted if such damage or loss is caused by the negligence of MCACD or DVAC staff.
2. \_\_\_\_\_ I hereby certify that I am not a student enrolled in a degree or certificate-granting program in the arts, nor will I be such a student during the grant period for which I am applying.
3. \_\_\_\_\_ I hereby certify that I will have been a resident of Montgomery County for one year before the application deadline, July 17, 2010 and will continue to be a resident during the grant period for which I am applying. (November 1, 2010 – October 31, 2011)
4. \_\_\_\_\_ I understand that if I do not collect my support materials by November 15, 2010, such materials will be discarded.
5. \_\_\_\_\_ If I receive a Montgomery County Arts and Cultural District fellowship, I will be present at the annual news conference. (Winter 2010)
6. \_\_\_\_\_ As an applicant I understand that my artistic documentation will be retained by MCACD for archival purposes.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

MCACD prohibits unlawful discriminatory practices based on race, color, religion, sex, national origin, ancestry, place of birth, age, marital status or disability.