Fukuoka Asian Art Museum Support Program 2020 Application Form 1 < Personal Data>

Category (please choose one)

Artist	Researcher /	Curator
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Name		
Sex	Date of birth	
Nationality		(Attach photo)
Place of birth	Other language(s)	3.5cm×4.5cm
Primary language(s):	1	
1	2	
2	3	
Home address (required)		
Tel Email	Fax Mobile	
Work		
Tel Email	Fax	
Other ()		
Tel Email	Fax	

Fukuoka Asian Art Museum Support Program 2020 Application Form 2 < Curriculum Vitae>

1. CV (Maxim	um 5 selected education and work experiences)
(Year)	
2. [ARTIST] I [RESEARC	Maximum 10 selected solo and group exhibitions, and activities HER] Maximum 10 selected curatorial projects and published papers
(Year)	
3. Artist in *Maximum	Residence (Name of the residency institution, city/country, and grant information) 5 selected previous residencies
(Year)	

Fukuoka Asian Art Museum Support Program 2020 Application Form 3 < Proposal 1/3>

1	Your desirable	residency period	

tarting from	to	Duration:	days
Reason to apply for our	program		

Fukuoka Asian Art Museum Support Program 2020 Application Form 4 < Proposal 2/3>

Plan of art-making (artists) / research activity (researcher/curator)

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*Describe tl	he	detail	of	your	plan	and	produ	ction/	resea	rch	schedu	ıle			

Fukuoka Asian Art Museum Support Program 2020 Application Form 5 < Proposal 3/3>

Workshop/Talk Plan
*If you have multiple plans, please photocopy this form.

*State the group(s) of people you would like to work with. (e.g. adults, students, children (specify the age group), parents and children etc.)

Fukuoka Asian Art Museum Support Program 2020 Application Form 6 < Letter of Declaration >

I,	hereby declare the information on the
application fo	orm is complete and accurate to the best of my
knowledge and	d belief.
I will certainly	bear all the expense of my residency in Fukuoka if I
were accepted	as a visiting artist/researcher/curator of the support
program.	
	Date
	Name
	Signature

Fukuoka Asian Art Museum Support Program 2020 Application Form 7 <Letter of Recommendation>

I would like to recommend the below-mentioned personnel for the Fukuoka Asian Art Museum Support Program 2020.

<u>Date</u>	Signature	
This form must be filled in by the	recommender	
Name of the recommender	Nationality	
Dccupation	Position	
Affiliation		
Address of the affiliated organization	on/institution	
ГеІ	Fax	
Home address		
Геl Email	Fax Mobile	
Relation with the artist		
Reasons for recommendation		