

Folk Arts Apprenticeship Program



Item 1: Applicant Information

Name of Master Artist:

Address:

City:	Zip:	Email:
County:	Master Artist Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Daytime Phone:	Evening Phone:	
Date of Birth:	Place of Birth:	
Master Artist Race: <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> White		

Item 2: Apprentice Information

Name of Apprentice:

Address:

City:	Zip:	Email:
County:	Apprentice Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Daytime Phone:	Evening Phone:	
Date of Birth:	Place of Birth:	
Apprentice Race: <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> White		

Item 3: Fiscal Receiver Information (if any)

Legal Name of Organization:

Mailing Address:

City:	State:	Zip:	County:
Daytime Phone:	Organization's Email:		
Contact Name:	Contact Title:		

Item 4: Project Details

Apprenticeship Start Date: / / Apprenticeship End Date: / /

Item 5: Folk Art Information

Describe the type of traditional folk art. What is its origin and value in your community's culture?

Section 1 (To be completed by the Master Artist)

When and from whom did you learn your art form's skills?

Have you taught an apprentice before?

How long have you known this apprentice?

Have you worked together before? Yes No If yes, in what capacity?

In your estimation, how much does the apprentice already know about the art form?

What does he or she still need to learn?

How will you help the apprentice learn the needed skills?

Where, when and how often will you meet?

What will you require the apprentice to work on between meetings?

What supplies and materials will you need?

Is any travel needed? If so, by whom? Why and to what locations?

What are your ideas for a final public presentation?

Section 2 (To be completed by each Apprentice)

What is your experience with the traditional folk art you wish to study, or in a related folk art?

When and from whom did you learn your present skills?

Why do you want to study with this master artist?

How do you plan to use your skills in the future?

I have been a Wisconsin resident since _____

Section 3: Budget Estimate

Master Artist's Fee: _____ hours X _____ per hour _____

Supplies and Materials:

Travel:

_____ Number of trips X _____ mileage or _____ fare _____

Other travel expenses: _____

Total Expenses (should total \$3,000) _____

Section 4: Individual Assurances

I certify that representations made in this application are true and complete to the best of my knowledge, and that the work sample submitted accurately represents my own work. The Wisconsin Arts Board has my permission to use my work sample, or a portion thereof, for publicity or educational purposes.

Please note: Completion of this application is voluntary; however, if you choose to apply to this program, the application must be completed in its entirety. Personally identifiable information will become part of the Arts Board's database and may be released upon request.

Signature of Master Artist _____ Date _____

I certify that representations made in this application are true and complete to the best of my knowledge, and that the work sample submitted accurately represents my own work. The Wisconsin Arts Board has my permission to use my work sample, or a portion thereof, for publicity or educational purposes.

Please note: Completion of this application is voluntary; however, if you choose to apply to this program, the application must be completed in its entirety. Personally identifiable information will become part of the Arts Board's database and may be released upon request.

Signature of Apprentice 1 _____ Date _____

(Include signatures and dates of additional apprentices if applicable.)

The fiscal receiver 1) assures that it has duly adopted a resolution, motion or taken a similar action designating the undersigned person to act as an authorizing official of the fiscal receiver for the purposes of this apprenticeship; 2) agrees to receive, record and disburse the grant monies to the master artist within two weeks after receipt of the grant monies from the Wisconsin Arts Board; and 3) agrees to refrain from making or imposing artistic or programmatic decisions on the apprenticeship.

Signature of Fiscal Receiver _____ Date _____

Section 5: Work Sample Description (Audio or Video)

Sample 1

Type: DVD CD Audiocassette VHS Other _____

Begin: _____ End: _____ Year: _____

Title: _____

Description:

Sample 2

Type: DVD CD Audiocassette VHS Other _____

Begin: _____ End: _____ Year: _____

Title: _____

Description:

Sample 3

Type: DVD CD Audiocassette VHS Other _____

Begin: _____ End: _____ Year: _____

Title: _____

Description:

Section 5: Work Sample Description (Slides, Photographs or Digital Images)

Image 1

Title: _____ Year: _____

Description:

Image 2

Title: _____ Year: _____

Description:

Image 3

Title: _____ Year: _____

Description:

Image 4

Title: _____ Year: _____

Description:

Image 5

Title: _____ Year: _____

Description:

Image 6

Title: _____

Year: _____

Description:

Image 7

Title: _____

Year: _____

Description:

Image 8

Title: _____

Year: _____

Description:

Image 9

Title: _____

Year: _____

Description:

Image 10

Title: _____

Year: _____

Description: