



Arkansas Arts Council (501) 324-9150
1100 North St. fax:(501) 324-9207
Little Rock, AR 72201 www.arkansasarts.org

Arts in Education Artist Roster Application Form

- Send via Google drive or drop box to matt.boyce@arkansas.gov. Zip folder preferred. MUST be a shareable document.
 - See “AIE Artist Roster Application Instructions” for help in completing this form.
 - If you have questions the Arts in Education Program manager at 501-324-9769.
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Provide the following information.

Name:

Organization Name:
(if applicable)

Contact Person:

Mailing Address:

City:

State:

Zip Code:

Phone (work):

Phone (cell):

Email address:

Website:

State Senator:

State Representative:

In the space provided, please indicate the residency discipline and the related art form(s) under which you wish to be listed in the Arts in Education Artist Roster. See Residency Disciplines on pages 2 and 3 of “AIE Artist Roster Application Instructions”. Use the appropriate code numbers (i.e.-01 Dance A., B.). If you are 11 Interdisciplinary or 14 Multidisciplinary, please list the appropriate art forms.

PREFERRED AGE LEVEL OF RESIDENCY PARTICIPANTS

Check your preference(s): Pre-K/Kindergarten Elementary Middle/Jr. High Sr. High All ages

GEOGRAPHIC AREA IN WHICH YOU ARE WILLING TO WORK

Please list either “statewide” or a specific region in the state.

LIMITATIONS ON AVAILABILITY

Include dates or times of year you will be available to accept residencies. Please be specific.

ARE YOU AVAILABLE TO CONDUCT WORKSHOPS IN YOUR DISCIPLINE FOR TEACHERS AND OTHER GROUPS?

Yes No

SPECIAL REQUIREMENTS OR EQUIPMENT

Please list any special needs or equipment that will be expected of residency sponsors.

(All of the information above will be included in the online Artist Roster.)

ARTS IN EDUCATION EXPERIENCE (CHECK ONE)

- New to Arts in Education artist in residency program
- New to Arkansas Arts in Education programs, but experienced elsewhere
- Continuing Arkansas Arts in Education roster artist
- Former Arkansas Arts in Education roster artist Dates:

EXPERIENCES IN TEACHING, WORKSHOP OR RESIDENCY SITUATIONS

Begin with the most recent. Attach a separate list if more space is needed.

| Dates | Sponsor/Presenter | Contact Person | Location | Phone |
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NARRATIVE QUESTIONS

- 1) Provide a lesson plan for a sample one week residency based on repeated contact with the same core group of students for at least four one-hour sessions. Describe the composition of the core group, including age/grade level, size of group, materials needed, space, etc. Your lesson plan should follow this format:

Title of the lesson

1. Essential Question- Essential questions are written to stimulate student interaction and sustain student interest. The best essential questions are open-ended, non-judgmental, meaningful and purposeful, and invite an exploration of ideas.
2. State standards used in the lesson -For more information, see page 1 under “Teaching Artists” in the *Arts in Education Artist Roster Application Guidelines*
3. Lesson Objectives
4. Materials and resources
5. Introduction and/or focus of the lesson
6. Instructional strategies
7. Review or Conclusion
8. Assessment of the lesson

The lesson plan should make clear the learning objectives, i.e., what you want students to know and be able to do by the end of the lesson, as well as how you will assess these objectives. Some tips about goals and objectives are also included as one of the application documents, as well as a sample lesson plan.

- 2) Describe how you would work with classroom teachers/group leaders after you have left the school/community in order for them to continue or follow-up on activities that you initiated to maximize the impact of the residency. Limit to one page.

- 3) Describe one prior teaching, workshop, or residency experience in detail. What was the intent of the teaching, residency or workshop experience. What made the experience successful? Describe what you will do to improve on your program if given the opportunity again. Minimum one page.

ARTIST ROSTER SUMMARY (maximum 500 words)

This information will be listed in the online AIE Artist Roster along with your photograph. Background information should be written as a paragraph, **not** listed as a resume.

Use the headings of “Background” and “AIE Program” to provide a written description of 1) (Background) – your education/ background, professional affiliations, current artistic or residency activities, and 2) (AIE Program) – describe your approach to your art form in an educational setting, and provide an overall description of one of your residency programs, i.e. – the goals of the program, description of the content, description of the outcomes, skills and knowledge expected of students and teachers.

CHECKLIST OF MATERIALS SUBMITTED (see “Application Instructions and Required Materials” on page 2 of the *AIE Artist Roster Application Guidelines*).

- The completed narrative answers.
- A current resume OR organization’s resume and a list of participating artists.
- A list of names, addresses, e-mail addresses (home and work), phone numbers (day, evening, cell) of three professional references. If using teachers, please list out-of-school contact information.
- A one page minimum narrative from a reference who has sponsored or presented you from a previous teaching, workshop or residential experience. Must be signed by reference, include date, indicate the organization/school, and the reference's position within the organization/school.
- Required support materials/samples of work.
- A current photograph or organization logo.
- Printed copy of the Signature Page with original signature and date.

SIGNATURE PAGE

I have read the program description in the “AIE Artist Roster Application Instructions” and agree to comply with Arkansas Arts Council guidelines should I be accepted for the Arts in Education Artist Roster. I understand that placement on the roster is not a guarantee that I will receive a residency. I understand that if selected for a residency, I will be an independent contractor of the sponsoring organization and not an employee. As an independent contractor, I will not receive insurance or retirement benefits, worker's compensation, or unemployment benefits, and that any misrepresentation or false information contained in this application or any supporting materials shall result in my immediate removal from the roster.

signature

date

Return completed application to AIE Program, Arkansas Arts Council, 1100 North Street, Little Rock, AR 72201. Send via Google drive or DropBox to matt.boyce@arkansas.gov. Zip folder preferred. MUST be a shareable document.