

The William Fletcher Travelling Fellowship – Rome Residency

APPLICATION FORM

Send completed form to:
Robin Wines
Unit 64, 95 Stanhope Rd
Killara NSW 2071

Any questions?
Call Robin Wines
(02) 9416 2603

A. Contact details (Complete ALL fields.)

1. **full name:** Mr/Ms (Circle one).....
2. **address:**
..... postcode
3. **phone:** home mobile
4. **date of birth:**
5. **email address:**

B. Eligibility (Complete appropriate fields in at least two of (a), (b), (c).)

(a) training (ALL fields)

tertiary institution:

qualification awarded: year awarded:

(b) exhibition (ALL fields) (If you wish to indicate others, use optional CV.)

gallery: month & year:

solo or group (give details):

(c) commission / grant / prize (Complete AT LEAST ONE field, with year.)

commission: year:

grant: year:

prize: year:

C Application and declaration

I hereby apply for the William Fletcher Residency in Rome.

I declare that:

- 1) I am an Australian citizen PRESENTLY resident in NSW or ACT
- 2) I am applying in the field(s) of painting, drawing, sculpture (underline or circle)
- 3) I enclose a PowerPoint presentation containing ten (10) examples of my OWN work
- 4) I enclose two or more professional references
- 5) ALL the information I have supplied is correct
- 6) I have enclosed/directly deposited (strike out which does not apply) an entry fee of twenty dollars (\$20)

Direct deposit details: Date Name

signature: date:

witness (JP): date: