Toi Pōneke d/Deaf and disabled artist Development Residency 2022

Application Form

Remember, you can tell provide this information in a video if you prefer.

Contact the Toi Pōneke Public Programmer with any questions: Belinda.Campbell@wcc.govt.nz or 021 659 883.

Contact Information

We won't share this information with anyone unless you ask us to.

Your full name   -

Your email address   -

Your phone number   -

What is your preferred method of contact?

Phone ☐   **Email** ☐   **Other** (please state) ☐

If someone is helping you to fill out this form, and you would like us to contact them if we have questions, feel free to add their information next.

Residency Application

Name of your project
You can change this later if you wish.

Artist Statement
Describe your arts practice and areas of interest.
(Up to 250 words)

Concept for your work
Tell us about your idea and the art you want to make. Include physical, technical ideas. *(Up to 400 words)*

Residency Outcomes
Provide a brief statement about the potential outcomes of this residency. What would this opportunity mean to you? *(Up to 200 words)*

Supporting Documents

Weblinks

Provide any links to your work that you'd like us to see.

-
-
-

Images

Provide below (at least) three images of your work relevant to your application.

1.
2.
3.

CV

Please include a short 1–2-page CV in this application.

If you are unable to paste into this document, you can upload separately. **Please ensure documents are labelled with your full name.**

Access Requirements

Toi Pōneke want to ensure that this residency will meet your needs. We will check in with you throughout the residency and ask again in case anything changes.

Visit the Toi Pōneke Access page for more detail on accessing the space. For further information, contact our Public Programmer Belinda Campbell.

Please outline any access requirements you'd like us to be aware of below.

Checklist

Have you included:

- ☐ Contact information

- ☐ Artistic Statement

- ☐ Concept for work

- ☐ Residency Outcomes

- ☐ Provided weblinks to work (optional)

- ☐ Short CV

- ☐ Three images of your work

Submit your application

Upload this document (and any supporting documents) to [this OneDrive folder](#).

Please ensure all documents are labelled with your full name.

Useful contacts

To discuss your application, or enquire about this residency, contact our Public Programmer:

Toi Pōneke – Public Programmer
Belinda Campbell
(she/her)
021 659 883
Belinda.Campbell@wcc.govt.nz

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