

Application Form for Board Membership

Please type or print this entire form. It must be legible to be reviewed.

1. Name: _____
Home Address: _____
City: _____ Zip: _____ County: _____
Telephone: Home # _____ Daytime # _____

Can you attend meetings held the third Thursday of each month except August and December?
(Meetings begin at 2:00 p.m.) ___ yes ___ no

What kind of arts activities do you attend in your community and the surrounding communities?

2. *Please complete the sections appropriate to your artistic experience.*

Artistic Discipline: **Rank the disciplines in which you are the most knowledgeable. Put a 1 by your primary discipline and specify your expertise within the discipline.** Example: Visual Arts - painting; photography; drawing; etc. **Put a 2 and 3 by your secondary disciplines and specify your expertise in those disciplines.**

___ Dance: _____
___ Literature: _____
___ Music: _____
___ Theater: _____
___ Visual Arts: _____

Artistic Involvement: **Rank your top two involvements, 1 being your primary and 2 being your secondary.**

___ Arts Administrator ___ Arts Organization Volunteer ___ Working Artist
___ Art Teacher ___ Arts Consumer ___ Critic

Other, please specify: _____

3. *Please answer the following questions. Attach additional pages, if necessary.*

Describe why you would like to serve on the board of the Arrowhead Regional Arts Council?

(over)

Describe your **past and current involvements in the arts.** Include your activities as an artist, teacher,

administrator, etc.; your work with arts organizations, offices held, and memberships; volunteer activities; employment; etc. (*Attach documentation of your current artistic and/or administrative work. Documentation may include slides, audio or video cassettes, writing samples, publications, etc.*)

Have you ever served on a review panel or non-profit board? ____ yes ____ no If yes, for what organization(s)?

4. Please check the appropriate item:

- ____ I am applying as an individual.
____ I am applying as a representative of the following arts organization. Please list the organization's name, address, and phone.

Signature:

Date: _____

5. An application must include the following to be complete:

- An application form
- A resume or biographic information describing your training and involvement in the arts.
- Documentation of your current artistic and/or administrative work, in the form of slides, audio or video cassette, writing sample, publications, etc.

Submit your application to:

**Arrowhead Regional Arts Council
Marshall School Annex
1301 Rice Lake Road, Suite 111
Duluth, Minnesota 55811
218/722-0952 or 1-800-569-8134**

For Office Use Only - Date Received: _____