

AS220

STUDIO APPLICATION

NAME: Andre Duval Ardibe Bradley JR

DATE: September 22nd, 2014

DESIRED MOVE IN DATE: 10-1-14

1 VITAL STATS:

SO WE KNOW HOW TO CONTACT YOU DURING THE APPLICATION PROCESS.

CURRENT ADDRESS

29 Phillips Street

Providence, RI 02906

DAY NUMBER 267 788 6345

NIGHT NUMBER 267 788 6345

EMAIL abradley@risd.edu

2 PREFERENCE

PLEASE SELECT YOUR BUILDING AND STUDIO PREFERENCE

WORK-ONLY STUDIO

OR

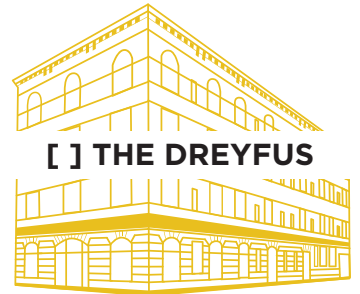
LIVE/WORK STUDIO



☐ 115 EMPIRE STREET



☐ MERCANTILE BLOCK



☐ THE DREYFUS

3 ANNUAL INCOME (SUBSIDIZED LIVE/WORK STUDIO APPLICANTS ONLY)

PLEASE SUBMIT THIRD PARTY PROOF OF INCOME SHOWING **GROSS ANNUAL INCOME. (COPIES ARE FINE)**

GROSS ANNUAL INCOME:

\$\$\$\$\$
\$\$\$\$\$
\$\$\$\$\$
\$\$\$\$\$
\$\$\$\$\$
\$\$\$\$\$
\$\$\$\$\$

25000

+ 4 WEEKS OF PAYSTUBS SHOWING **GROSS INCOME. (OVERTIME PAY, TIPS & ETC)**

+ IF SELF EMPLOYED INCLUDE **3 YEARS** WORTH OF TAX RETURNS AND RECENT QUARTERLY PROFIT & LOSS CALCULATIONS.

+ **OTHER INCOME INCLUDES, BUT IS NOT LIMITED TO :** UNEMPLOYMENT BENEFITS, SSI, WORKMAN'S COMP, TDI, INTEREST INCOME, COMMISSIONS & SSDI

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT **SUSAN CLAUSEN** AT **SUSAN@AS220.ORG**

4 MEDIUM/GENRE

WHICH OF THE FOLLOWING BEST DESCRIBES YOUR WORK?

☐ DRAMA

☐ PAINTING

☐ MUSIC

☐ INDUSTRIAL ARTS

☐ WRITING

☐ PHOTOGRAPHY

☐ COMPOSITION

☐ SCULPTURE

☐ DESIGN

☐ PRINTMAKING

☐ PERFORMANCE

☐ OTHER _____

☐ MAKER

☐ FILM/VIDEO

☐ INSTALLATION

5 ARTISTIC BIO

PLEASE ATTACH A SHORT PARAGRAPH DESCRIBING YOUR WORK.

6 CURRENT PROJECTS

PLEASE INCLUDE A BRIEF DESCRIPTION OF WHAT YOU ARE CURRENTLY WORKING ON. ATTACH ADDITIONAL PAGES IF NEEDED.

7 SUPPORT MATERIALS/WORK SAMPLE:

PLEASE SUBMIT THE APPLICATION FORM AND SAMPLE OF WORK (**ONLINE SAMPLES OK!**)

- + **VISUAL ARTISTS** PLEASE SUBMIT 12 IMAGES ONLINE OR ON A DATA CD
- + **PERFORMING ARTISTS, MUSICIANS AND FILM/VIDEO** WILL SUBMIT A 5-10 MINUTE SAMPLE OF MATERIAL ONLINE OR ON DVD.
- + **WRITERS** WILL SUBMIT 5-10 PAGES OF REPRESENTATIVE WORK
- + **CONCEPTUAL OR MULTI-DISCIPLINARY ARTISTS** MAY SUBMIT A WRITTEN DESCRIPTION OR AUDIO/VISUAL REPRESENTATION.
- + ANY OTHER CLIPPINGS, REVIEWS, ETC WHICH YOU THINK WE MAY BE INTERESTED

8 ARTISTIC RÈSUMÈ

PLEASE ATTACH A **1-2 PAGE ARTISTIC RESUME**. THIS SHOULD INCLUDE A HISTORY OF YOUR PREVIOUS ARTISTIC ACCOMPLISHMENTS AND WORK HISTORY.

LIST EXHIBITS, PUBLIC PERFORMANCES, COMMISSIONS, COLLABORATIONS, PROJECTS, ETC.

9 REFERENCES

PLEASE LIST 3 INDIVIDUALS AS REFERENCES

A. PERSONAL/PROFESSIONAL

THIS COULD BE A PREVIOUS EMPLOYER, TEACHER, ROOMMATE, OR OTHER NON-RELATIVE WHO HAS BEEN IN CLOSE RECENT CONTACT WITH YOU.

NAME Sam Seidel

ADDRESS 49 Chapin St Providence, RI

PHONE 401-263-1994

B. PERSONAL/PROFESSIONAL

NAME _____

ADDRESS _____

PHONE _____

C. FINANCIAL

THIS CAN BE A RECENT LANDLORD OR EMPLOYER THAT CAN ESTABLISH A HISTORY OF STEADY INCOME AND AN ABILITY TO PAY MONTHLY RENT.

NAME _____

ADDRESS _____

PHONE _____

THIS APPLICATION MAY BE **MAILED,**
EMAILED OR DROPPED OFF AT:



ATTN: SUSAN CLAUSEN

95 MATHEWSON ST #204

PROVIDENCE, RI 02903

401-831-9327 **X 118**

FAX: 401-454-7445

SUSAN@AS220.ORG

OR

ATTN: KELLY ORR

95 MATHEWSON ST #204

PROVIDENCE, RI 02903

401-831-9327 **X 120**

FAX: 401-454-7445

KELLY@AS220.ORG