

Applicant's
name

Shell Art Award Residency Support Program Application Form 2019

① Applicant Details

Name※

※Please put the name printed on your passport.

Artist name

Shell Art Award
Selected Year

Nationality

Birth Place

Date of Birth day/month/year

Age※

※ as of 31 March 2019

M/F

Male

Female

Postal code

Address

Phone

E-mail

Website URL

Applicant's
name

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② Profile , Proposal

Activity Base	City		Country	
Filed of Art	<input type="checkbox"/> Painting	<input type="checkbox"/> Print	<input type="checkbox"/> Photo	<input type="checkbox"/> Installation
	<input type="checkbox"/> Other ()			

Education (school, department, major, and etc)	

Exhibitions (From newest to oldest)	Solo Exhibition	
	Group Exhibition	
	Project	

**Awards,
Grants &
Residences**

**Language
proficiency
(English)**

<input type="checkbox"/> Native	<input type="checkbox"/> Business use	<input type="checkbox"/> Basic
<input type="checkbox"/> Beginner	<input type="checkbox"/> Not Available	
comment		

**Language
proficiency
(French)**

<input type="checkbox"/> Native	<input type="checkbox"/> business use	<input type="checkbox"/> Basic
<input type="checkbox"/> Beginner	<input type="checkbox"/> Not Available	
comment		

**Have you ever stayed in
Paris?**

<input type="checkbox"/> No	<input type="checkbox"/> Yes	Year
comment		

Please tell us about your work and its concept.

Proposals

Please tell us why you apply for this program with plans and goals along with detailed schedule if possible.