Gallery A / Art Lab 2016 Project Submission Application Form

For more information, please contact Leslie Menagh, Manager of Public Programs & ArtReach at lmenagh@rmg.on.ca or 905.576.3000 ext. 108

Contact Information Lead Artist Name: Email Address: Phone Number: (with area code) Street Address Line 1: Street Address Line 2: City: State / Province: Postal / Zip Code: Country: Would you like to receive e-mail updates about workshops, artist talks and events at the RMG?: Yes / No

Project Information

Please tell us more about your proposed project. If extra space is required to complete the following questions, please label and attach your answers on additional sheets of paper.

Are you applying to participate in an Art Lab Residency?	Yes / No
Which category best describes you? (Please check one)	A professional artist
	A professional curator
	An arts collective
	A community group collaborating with a professional artist
	Arts professional or researcher
	Post-secondary student, pursuing education in fine arts or related field
	Other (please specify
Does this project meet any of our priority criteria? Please plain how.	select those criteria that apply and ex-
Engage artists residing in the Durham Region;	
Align with the RMG's statement of purpose, specific munities through the continuing story of modern and con	
Share multiple perspectives and engage underrepre cludes, but is not limited to artists, art practices and com Diverse (POC). Deaf. Disabled or LGBT2Q	

Tell us about yourself or your organization: Artist philosophy, curatorial statement, organizationa goals, missions, values, etc	al
Tell us about the project or event are you proposing (Solo or group exhibit? Residency? A special event like a film screening, a panel discussion or a community gathering? Etc) Please be as de tailed and concise as possible.	
What audiences do you serve? What is the expected attendance (for special events)?	
As part of our professional development opportunities, you may be asked if you are interested in participating in any of the following. Please check those items of interest. ———————————————————————————————————	ı
(peer critique)	

Preferred Date(s)

Projects taking place from March 1, 2017 – September 3, 2017

Your preferences will be considered when creating the program schedule. Please indicate your time block preferences in order of most preferable to least. Exhibitions typically span one time block, and Art Lab residencies up to 2 adjacent time blocks.

March 2017
April 2017
May 2017
June 2017
July 2017
August 2017

Please specify if there are event dates you'd like us to know about in conjunction with other special events (ie. holidays, screenings, symposia and other projects).

Support Materials - CVs

Please ensure CVs are saved as PDFs, with a maximum file size of 2MB each. Please label the file with the name of the artist or curator – i.e. JaneSmith-cv.pdf

Artist CVs

Please attach the CV(s) of the lead artist(s) or curator(s) and list their names:

Name of Artist(s) or Curator(s)

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Support Materials - Images

Please provide 6-8 digital images of your artwork. Files should be JPGS, GIFS or PNGs at 72 dpi, RGB, with a minimum width of 500 px to a maximum width of 1200px. Each file cannot exceed 2MB.

Number each digital file so that it corresponds with the listing. Please save your files with the image number, artist initials, year, file name – for example – 01js2014bluepainting.jpg, 02js2014red-painting.jpg, etc

Links to websites are not accepted

The information provided below is required to correspond to the images enclosed

lmage 1	Artist Name
	Title (example: untitled, Blue House, etc)
	Medium/materials (oil on canvas, video projection, bronze cast, etc)
	Year
Image 2	Artist Name
	Title
	Medium
	Year

Image 3	Artist Name
	Title
	Medium
	Year
Image 4	Artist Name
	Title
	Medium
	Year
Image 5	Artist Name
	Title
	Medium
	Year

Image 6	Artist Name
	Title
	Medium
	Year
Image 7	Artist Name
	Title
	Medium
	Year
Image 8	Artist Name
	Title
	Medium
	Year