

Please complete and return this form with your proposal.

I am applying for the following Residency (please tick) :

Professional Residency Self Directed Residency Graduate Residency

Name _____

Address _____

_____ State _____ Postcode _____ Country _____

Phone _____ Mobile _____

Fax _____ Email _____

Field of practice: _____

What are your preferred dates for the proposed Residency? _____

Please attach:

- The proposal for your Residency briefly describing the type of work to be carried out
- A current C.V.
- Images or examples of work relating to your proposal (digital, prints or slides)
- Any other relevant promotional material
- For Graduate Residency applicants: a signed letter from your tutor stating your ability to work safely and independently

Applications should be posted to:
Mark Viner
Head of Sturt
PO Box 34
Mittagong NSW 2575
Australia

Emailed to:
Mark Viner
mviner@sturt.nsw.edu.au

Faxed to:
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