

SANCHEZ ART CENTER

1220 B Linda Mar Blvd.
Pacifica, CA 94044
650-355-1894
info@sanchezartcenter.org
www.SanchezArtCenter.org

STUDIO APPLICATION

Name _____ Email _____

Address _____

Home phone _____ Cell phone _____

Primary Medium _____

Which type of space you are most interested in? Please note all studios are rented "as is." See attached for rates.

- Single occupant small studio with sink
- Single occupant small studio – NO sink
- Share large studio
- Single occupant large studio

What materials, equipment or tools do you plan to use in the studio? _____

What energy / utility or special requirements do you have? _____

How often do you plan to use the studio space each week? _____ hrs per week

What time of day / night are you likely to use a studio space? _____

What are your goals as an artist? _____

Please read the Service Hour Requirements section of the Application Process & General Information document.

Are you willing and able to participate? YES NO

Briefly describe any volunteerism, arts related or other, that you have participated in: _____

Please attach resume, artist statement, bio, and/or exhibition history to demonstrate your artistic background.

Please provide samples of work in the form of photos, color copies, duplicate slides, or CD/DVD.

DO NOT submit original artwork. Please provide S.A.S.E. if you would like your materials returned eventually.

Additional Comments: _____

Please provide name, address and/or phone numbers of two professional references (landlords, vendors, professional/artist acquaintances, etc.)

1. _____ 2. _____

Signature _____ Date _____

Sanchez Art Center is a California Non-Profit Public Benefit Corporation.