

FY2017 Application
Architectural Artists Directory
Application Deadline: Aug. 15, 2016

This form must be typed; no handwritten applications will be accepted. Please refer to the guidelines and instructions.

Applicant Info U.S. Congressional District _____ KY Senate District _____ KY House District _____ For district info, call your County Clerk's office.	Salutation <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr.			
	First Name		Last Name	
	Mailing Address			
	Business Name			
	City	State	ZIP	County
	Street Address (if different from Mailing Address)			
	Daytime Phone		Second Phone	
	Email Address			
	Web Address			

Medium Choose all that apply.	<input type="checkbox"/> Ceramics <input type="checkbox"/> Environmental Graphics <input type="checkbox"/> Glass <input type="checkbox"/> Metal <input type="checkbox"/> Mixed Media <input type="checkbox"/> Stone <input type="checkbox"/> Wood
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DUNS Number	<input style="width: 100%;" type="text"/> <i>The arts council requires that all applicants have a Data Universal Numbering System (DUNS) number. For information on obtaining a DUNS number, see the Guidelines.</i>
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Sales and Use Tax Account Number	<input style="width: 100%;" type="text"/>
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KAC staff use only:		
FY: 2017	APP #:	CLIST #:
App Status: _____	App Institution: _____	App Discipline: _____
Project Disc: _____	Activity: _____	Project Race: _____
AIE Percent: _____	AIE Description: _____	Project Descriptors: _____
Grant Program: AAD	Grantee Race: _____	Date Received: _____

Application Checklist

Include this application checklist as the first page of your application package.

Your application is not complete and will not be forwarded to the panel for review if it does not contain the following **mandatory material**. Carefully review the guidelines for instructions on compiling your application.

One signed original of the following:

- Architectural Artists Directory program application form

One copy of the following:

- Work sample CD
- Work sample index
- Professional resume
- Narrative
- Copy of completed Form 10A100 (if sales and use tax account number not supplied)

One copy of two of the following:

- Kentucky driver's license, which includes the date issued and expiration date or Commonwealth of Kentucky identification card
- Kentucky voter registration verification (downloadable from the State Board of Elections' Voter Information Center website at <https://vrsws.sos.ky.gov/VIC/>)
- Kentucky state income tax Form 740 for the most recent year

One copy of optional supporting materials:

- Letters of support from former clients or colleagues
- Articles, reviews, etc.
- Promotional materials such as brochures, etc.

Request acknowledgement of receipt of your application:

- Provide an email address: _____

PLEASE NOTE: The arts council **does not** return work samples or supporting materials.

Applicant Signature

I certify that the foregoing statements and enclosures are true and complete to the best of my knowledge.

Applicant Signature _____ Date _____

All signatures must be in RED ink.

Mailing Address for Completed Application

Kentucky Arts Council
Capital Plaza Tower
500 Mero Street, 21st Floor
Frankfort, KY 40601

Applicant Name: _____
Architectural Artists Directory Application

Work Sample Index

For the Architectural Artists Directory program you **must** submit a CD with work sample images representing at least six architectural or design-oriented projects. You may submit up to three images of each project, showing alternate views or details. Information on the work sample index should correspond with the appropriately numbered image on the CD. **Do not submit originals.**

Complete the following accurately and completely. Dates of installation or completion must be provided. Space is available to include a description or additional details about each piece.

1. Title:	_____	Date Completed: _____
Client or Location:	_____	
Dimensions:	_____	
Description of Project:	_____	
2. Title:	_____	Date Completed: _____
Client or Location:	_____	
Dimensions:	_____	
Description of Project:	_____	
3. Title:	_____	Date Completed: _____
Client or Location:	_____	
Dimensions:	_____	
Description of Project:	_____	
4. Title:	_____	Date Completed: _____
Client or Location:	_____	
Dimensions:	_____	
Description of Project:	_____	

Applicant Name: _____
Architectural Artists Directory Application

5. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

6. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

7. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

8. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

9. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

Applicant Name: _____
Architectural Artists Directory Application

10. Title: _____ Date Completed: _____
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Description of Project: _____

11. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

12. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

13. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

14. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

Applicant Name: _____
Architectural Artists Directory Application

15. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

16. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

17. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____

18. Title: _____ Date Completed: _____
Client or Location: _____
Dimensions: _____
Description of Project: _____