



## Application

| Applicant Information                            |                         |                        |
|--------------------------------------------------|-------------------------|------------------------|
| Requested Cabin (if available):                  | Secondary Cabin Choice: | Tertiary Cabin Choice: |
| Name:                                            |                         |                        |
| Address:                                         |                         |                        |
| Phone:                                           | E-Mail Address:         |                        |
| Website/Blog:                                    |                         |                        |
| Artistic Medium:                                 |                         |                        |
| Preferred Dates of Residency (up to five days ): |                         |                        |
| First:                                           |                         |                        |
| Second:                                          |                         |                        |
| Third:                                           |                         |                        |

**References:** Please list the names and contact information for two people that can speak to why you would make a good candidate for this program.

| Reference 1 |               |
|-------------|---------------|
| Name:       | Relationship: |
| Phone:      | E-Mail:       |

| Reference 2 |               |
|-------------|---------------|
| Name:       | Relationship: |
| Phone:      | E-Mail:       |

**Statement of Purpose:** Please include a statement explaining the focus of your project, relevance of this project to Alaska State Parks, and the potential for personal growth during this residency. In addition, please describe your proposed community workshop/presentation or other community engagement activity that will result from your residency. As part of your Statement of Purpose, please describe any experiences you've had staying or living in cabins or in remote or harsh environments.

**Resume:** Please provide a resume of no more than two pages.

**Samples of Art:** Please provide digital images of six samples of artwork, and include a short summary

## Program Requirements:

Artists that are selected for the program agree to:

1. Provide their own transportation to and from their cabin. Park Rangers can assist in the transportation to and from some cabins if prearranged.
2. Host a community workshop or presentation during or following their residency and submit a summary of the event to Alaska State Parks.
3. Donate one original piece of art resulting from the residency to Alaska State Parks, which means the artist relinquishes publishing and reproduction rights to that work.
4. The artwork must be completed and donated within six months of completing the residency. Artwork from visual artists should be framed and prepared for hanging before donation.
5. Provide a high resolution, professional quality digital image of their donated artwork to Alaska State Parks.

**Application Checklist** – Please include the following with your submitted application:

- ☐ Signed Application
- ☐ Statement of Purpose
- ☐ Resume
- ☐ Samples of artwork
- ☐ \$50 application fee (fee can be paid following submission of your application by contacting George Deaton at (907) 269-8675 (receipt code 71KU)

Applications for the coming season will be **due no later than October 31, 2025**, and acceptance/confirmations will be made by November 30, 2025. Ideally, we will try to schedule your stay at least 7 months out to avoid any scheduling conflicts. Stays may be scheduled earlier if cabin availability permits.

Applications can be emailed to Wendy Sailors at [wendy.sailors@alaska.gov](mailto:wendy.sailors@alaska.gov) or submitted via mail at the following address: Arts in the Parks, 550 West 7th Ave, Suite 1380, Anchorage, AK 99501.

I agree that I will complete my donated artwork and community workshop/presentation within six months of completing my residency, and that I am willing to sign over publishing and reproduction rights for my donated artwork to the State of Alaska. I also agree to provide a high resolution, professional quality digital image of my completed artwork, and will submit a summary.

|                      |                      |
|----------------------|----------------------|
| <b>Signature:</b>    | <b>Date:</b>         |
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