SCRATCH LAB RESIDENCY APPLICATION

Please complete questions below. The word count listed is the maximum allowable words for that question.

For more information on our residency programs, visit www.hi-artsnyc.org/residencies.

For residency Frequently Asked Questions (FAQ), visit www.hi-artsnyc.org/residencies-faq.

Feel free to contact staff at info@hi-artsnyc.org with any additional questions. We will respond within 2-3 business days.

* Required

1. Email address *

2. Name of Individual Artist(s)/Ensemble *

3. How many artists will be involved in the residency and what would be their roles? (100 words) *

   __________________________________________

   __________________________________________

   __________________________________________

   __________________________________________

   __________________________________________
4. Individual Artist(s)/Ensemble Bio (300 words) *

5. What is your artistic discipline/form? *

6. How does your personal value system resonate in your work? (250 words) *

7. Provide a description of the project. (100 words) *
8. This residency is for artists who are developing a new concept or narrowing in on a key idea. What is that new concept or key idea for you, and how will the residency help you reach the next level of your work? (250 words) *

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9. How can Hi-ARTS be supportive during this residency? How might you use the available resources? (150 words) **

The program includes 25 hours of rehearsal time and a public work-in-progress sharing. The residency can include artistic support (producing consultation with curatorial team), technical support (basic lighting and sound support, piano), and administrative support (WiFi access, printing, basic rehearsal supplies).

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10. Has there been any prior development for this specific project? If so, please describe. (100 words)
11. Describe the audiences/communities you want to reach. (200 words) *


12. When would you like to begin your residency? Please select the residency period you would MOST like to be considered for. *

We will prioritize applications submitted within the deadline period for a particular season, but you may indicate in the next question if you’re interested in being considered for additional seasons.

*Mark only one oval.*

- [ ] January - March 2021
- [ ] April - June 2021
- [ ] July - September 2021
- [ ] October - December 2021

13. Are there additional seasons you would like to be considered for? Select all that apply.

*Check all that apply.*

- [ ] January - March 2021
- [ ] April - June 2021
- [ ] July - September 2021
- [ ] October - December 2021

14. What is your rehearsal time availability? Select all that apply. *

*Check all that apply.*

- [ ] Morning (10am - 1pm)
- [ ] Afternoon (1pm - 5pm)
- [ ] Evening (5pm - 10pm)
15. Include up to three links to work samples that reflect your practice. Please include a short description for each sample. *  
The work sample does not have to be related to the current proposed project as long as you feel it's an adequate reflection of your practice.

[Links and descriptions]

16. If there are any upcoming performances for this work, please enter information for up to three performances. List the show title, the performance date, the venue name, city, and state. (200 words)

[Performance information]

OPTIONAL DEMOGRAPHICS INFORMATION  
This information is for statistical purposes only and will not be used in your residency review.

17. How do you identify? (Check all that apply)  

Check all that apply.  

☐ Woman  
☐ Man  
☐ Non-Binary  
☐ Transgender  
☐ Choose not to identify  
Other: ☐
18. How do you identify? (Check all that apply)

Check all that apply.

☐ African-American
☐ Asian/Pacific Islander
☐ Latinx/Hispanic
☐ Native American
☐ White
☐ Multiracial
☐ Choose not to identify

Other: ☐

19. What is your age?

Check all that apply.

☐ Under 18
☐ 18-24
☐ 25-34
☐ 35-44
☐ 45-54
☐ 55-64
☐ 65+

20. What is your ZIP code?

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