



New Bedford Art Museum / Artworks!

TAC: TEEN ARTS COUNCIL 2017-2018

STUDENT APPLICATION (Please print legibly)

Applicant Contact Information (All fields required)

Date: _____

Name: _____
Last First Middle

Home Address: _____
Street Name Apt./ P.O. Box #

City /Neighborhood _____ State _____ Zip Code: _____

DOB: month/day/year _____

Home Phone # _____ Cell Phone # _____

Email Address: _____

High / Middle School Currently Attending: _____ Grade: _____

Not in school Highest grade level attained _____

Parent/Guardian Information (All fields required)

First Name: _____ Last Name: _____

Relationship to Applicant _____

Home Address: _____
Street Name Apt./ P.O. Box #

City /Neighborhood _____ State _____ Zip Code: _____

Cell phone _____ e-mail _____

This person is an emergency contact? Yes No

Parental / Guardian Consent (Required)

Field Trip Release _____ I (print name) _____ give permission for my child (**child's name**) to attend any scheduled field trips as part of the Teen Arts Council program. Furthermore, for and in consideration of arrangements and provisions made for the conduct of the activity, I hereby release the New Bedford Art Museum/ArtWorks! (NBAM) and its representatives from all liability resulting from injury sustained by my child during such trips/activities.

PHOTO RELEASE

NBAM/ArtWorks! continually documents programs and events for the purpose of publicity and fundraising. A signature below will act as a model release authorizing us to include your child in any photography or video. NBAM/ArtWorks! retains the copyright for any videos produced by students.

Parent/Guardian Signature: _____ Date: _____

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The TAC program requires a minimum of 3 hours or more per week once or twice monthly. Candidates must commit to the time required to ensure successful outcomes.

Will transportation be a problem? yes no

If yes, please describe: _____

Do you have any other responsibilities or obligations that could interfere with your TAC engagement?

Yes No

If yes, please describe days and times you are **not** available.

How did you hear about NBAM/ArtWorks! Teen Arts Council?

Why are you interested in becoming a member of the Teen Arts Council?

Tell Us About You

There are no correct or wrong responses. We're trying to get to know you better. Keep it real.

What types of Art are you interested in? _____

Who is your favorite artist? _____

Special Skills: (computer art, photography, visual art, theater, dance, social media, marketing, oral communication (speaking,,DJ-ing, singing) writing, leadership, motivating peers). Please give example or explain in such a way as to demonstrate your special skill. Use separate sheet if necessary. (75 words).

Describe your two best qualities.

Quality 1 _____

Quality 2 _____

Describe one quality you'd like to improve on and why.

Would you like to be added to the NBAM/ArtWorks! Teen Programs Mailing List? (Yes or No) *

Would you like to be involved in committee work for the Teen Arts Council? (unpaid internship)

- marketing and promotion
- event planning
- program planning
- advocacy and recruitment
- community outreach

Do you prefer that we call or email? _____

If you prefer a phone call, give best day/ time to reach you and phone number _____

Creative Response:

The Challenge: Respond to the word "motivation"

Responses can be in any creative format. For example a visual or auditory work can replace a written response. Responses can be sent via email or mailed.

If sending an image make a jpeg.

Enclose separate sheet for written response.