

www.leartroom.co.uk Tel: 0115 9461661

LONG EATON ART ROOM STUDIO APPLICATION FORM

YOUR CONTACT DETAILS:	
NAME:	
ADDRESS:	
	POST CODE:
HOME TEL:	BUSINESS TEL:
MOBILE TEL:	DATE OF BIRTH:
EMAIL:	. WEBSITE:
ABOUT YOU:	
WHAT ART FORM DO YOU WORK IN:	
DO YOU USE ANY SPECIALIST EQUIPMENT IN YOUR WORK THAT MAY CREATE HEAT OR NOISE? (E.G. KILNS, BLOW TORCHES, SAWS DRILLS ETC IF IN DOUBT PLEASE ASK OR DETAIL):	
	OUR WORK? (WE HAVE TO TAKE INTO ACCOUNT SPILLS OF
	CTS OUR FIRE SAFETY SYSTEM):
IF YOU HAVE SET UP A BUSINESS PLEASE GIVE THE DATE ESTABLISHED:	
ARE YOU A SOLE TRADER/LIMITED COMPANY:	
FROM WHERE ARE YOU CURRENTLY WORKING:	
WHAT IS YOUR CURRENT EMPLOYMENT STATUS (PLEAS	SE CIRCLE): UNEMPLOYED / STUDENT / EMPLOYED HRS:
ARE YOU WILLING TO PARTICIPATE IN OPEN STUDIOS /	EVENTS / EXHIBITIONS:
WHAT COULD YOU CONTRIBUTE TOWARDS THEM:	



SUPPORT YOUR APPLICATION:
STUDIO:
WHICH ARE YOUR PREFERRED STUDIOS:
HOW MANY HOURS PER WEEK DO YOU INTEND USING THE STUDIO? DESCRIBE (APPROX) WHEN THIS WILL BE:
WHERE DID YOU HEAR ABOUT LONG EATON ART ROOM STUDIOS:
ADDITIONAL INFORMATION TO INCLUDE IN YOUR APPLICATION:
PLEASE INCLUDE VISUALS OF YOUR WORK OR A LINK TO A WEBSITE TO VIEW THEM AT
 ANY OTHER RELEVANT INFORMATION EG CV, LIST OF SHOPS OR GALLERIES SELLING YOUR WORK OR ANY EXHIBITIONS YOUR WORK HAS BEEN IN TO SUPPORT YOUR APPLICATION.
DECLARATION:
I DECLARE THAT THE DETAILS GIVEN ON THIS FORM ARE TRUE TO THE BEST OF MY KNOWLEDGE.
SIGNED: DATE:
PLEASE RETURN YOUR COMPLETED APPLICATION TO:
Josie Harrington, Long Eaton Art Room, 29-31 Lime Grove, Long Eaton, Nottingham. NG10 4LD
FOR OFFICE USE ONLY:
DATE APPLICATION RECEIVED:
APPLICATION ACCEPTED / REJECTED:
IF REJECTED WHY:
INTERVIEW DATE:

OUTCOME:

FURTHER COMMENTS: