

SECTION F

APPRENTICE*

Name _____ Telephone _____

Address: Street or P.O. Box _____

City _____ County _____

State _____ Zip _____

E-mail _____ Age _____

Name of Master Artist: _____

Why do you want to study with this Master Artist?

How long have you been working with the Master Artist? _____

How much experience do you have with the art form?

Signature of Apprentice

Date

EXAMPLES OF WORK

If the Apprentice has participated in a previously funded Apprenticeship with the Master Artist, please submit a sample of the Apprentice's work. This can be in the form of photos (for a craft) or an audiotape, CD or DVD recording (for music or dance).

*Up to five (5) Apprentices may be included in this section of the application. Please make a copy of this page for each Apprentice listed. Each Apprentice must complete Section F.