

BirdsⁱⁿArt

2018

Biographical Information

Please type or print legibly

Personal Information

Name*

First _____ Middle _____ Last _____

(as it should appear in the catalogue; will be listed alphabetically by last name)

Male _____ Female _____ Birth Year _____ Country of Birth _____

Married: Yes _____ No _____ Name of Spouse _____

Day Phone _____ Cell Phone _____

Fax _____ Email _____

Website _____

Currently Residing

City _____ State/Province/Shire _____

Country _____

Education Cite only those from which you received a degree

1. Degree received _____

University or Art School _____

City/State**/Country _____

2. Degree received _____

University or Art School _____

City/State/Country _____

* Please help us avoid confusion by not writing in all upper-case letters. Clearly and correctly **use upper-case and lower-case letters**. If you suspect there might be confusion regarding the alphabetizing of your name, please underline the letter that should be used to determine alphabetical order in the catalogue. **Also be precise in the use of accent marks. And, if use of a middle initial/name is appropriate, please be specific above.**

**Please list State, Province, or Shire as appropriate.

Exhibitions (Limit to 2016, 2017, 2018 only)

Do not include exhibitions held for less than four days or Woodson Art Museum Exhibitions/Tours.

One-person exhibitions (Cite only the first location, not subsequent tour venues)

1. Complete museum/gallery name _____
Month/Year of opening _____ City/State/Country _____
2. Complete museum/gallery name _____
Month/Year of opening _____ City/State/Country _____
3. Complete museum/gallery name _____
Month/Year of opening _____ City/State/Country _____

Group exhibitions (Cite only the first location, not subsequent tour venues)

1. Complete Exhibition Title _____
Complete museum/gallery name _____
Month/Year of opening _____ City/State/Country _____
2. Complete Exhibition Title _____
Complete museum/gallery name _____
Month/Year of opening _____ City/State/Country _____
3. Complete Exhibition Title _____
Complete museum/gallery name _____
Month/Year of opening _____ City/State/Country _____

Exhibition Awards (Limit to 2016, 2017, 2018 only)

1. Award Title _____ Year Received _____
Complete Exhibition Title _____
Site of Exhibition _____
City/State/Country _____
2. Award Title _____ Year Received _____
Complete Exhibition Title _____
Site of Exhibition _____
City/State/Country _____

3. Award Title _____ Year Received _____
Complete Exhibition Title _____
Site of Exhibition _____
City/State/Country _____

Non-Exhibition Awards (Limit to 2016, 2017, 2018 only)

1. Award Title _____ Year Received _____
Awarding Organization _____
City/State/Country _____
2. Award Title _____ Year Received _____
Awarding Organization _____
City/State/Country _____
3. Award Title _____ Year Received _____
Awarding Organization _____
City/State/Country _____

Collections Public and Corporate Collections (such as museums, businesses, and government entities); please be as specific and complete as possible and provide only recent information.

1. Name _____
City/State/Country _____
2. Name _____
City/State/Country _____
3. Name _____
City/State/Country _____

Completed Commissions (Limit to 2016, 2017, 2018 only)

Public and Corporate Collections (such as museums, businesses, and government entities); please be as specific and complete as possible.

1. Name _____
City/State/Country _____
2. Name _____
City/State/Country _____
3. Name _____
City/State/Country _____

Bibliography (Limit to 2016, 2017, 2018 only)

List books or articles written and/or illustrated by you or about you; clarify your inclusion/involvement if it is not clear from either the title or the attachments. Please send originals, copies, or PDFs of publications, magazine tear sheets, brochures, catalogues, etc.

1. Name of Book/Article _____
Publisher/Publication Name _____
Date Published _____
2. Name of Book/Article _____
Publisher/Publication Name _____
Date Published _____
3. Name of Book/Article _____
Publisher/Publication Name _____
Date Published _____

Representatives

List in order of preference; a maximum of three will be listed alphabetically if space is available. **Only Name, City, and State/Province/Shire will appear in catalogue.**

1. Name _____
Street Address _____
City/State/Zip/Country _____
Telephone _____ Email _____
2. Name _____
Street Address _____
City/State/Zip/Country _____
Telephone _____ Email _____
3. Name _____
Street Address _____
City/State/Zip/Country _____
Telephone _____ Email _____

Please list State, Province, or Shire as appropriate.