



PERISCOPE
ARTIST ENTREPRENEUR TRAINING

PERISCOPE: ARTIST ENTREPRENEUR TRAINING APPLICATION

About the Applicant:

Name: _____

Address: _____

City: _____ Zip: _____

Phone: (____) ____ - _____

Email: _____

Website (if any): _____

Date of birth: ____ / ____ / ____ I identify my gender as: _____

Would you describe your geographic location as Urban Suburban Rural

Racial characteristics (check all that apply):

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Native American | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Black/African-American | <input type="checkbox"/> Pacific Islander | |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> White/Caucasian | |

How did you hear about this opportunity?

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> Searching Online | <input type="checkbox"/> Facebook |
| <input type="checkbox"/> Media: _____ | <input type="checkbox"/> Blog | <input type="checkbox"/> Twitter |
| <input type="checkbox"/> Nomination | <input type="checkbox"/> Email from: _____ | <input type="checkbox"/> Other: _____ |

Primary artistic genre(s):

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Drama/Theatre | <input type="checkbox"/> Film/TV | <input type="checkbox"/> Music |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Literature | <input type="checkbox"/> Visual Arts |
| <input type="checkbox"/> Fashion | <input type="checkbox"/> Multi-Disciplinary | <input type="checkbox"/> Other: _____ |

How long have you been working professionally?

- Less than 3 years 3 – 8 years 9 – 13 years 14 – 20 years More than 20 years

Are you willing to participate in ongoing program evaluation through 2017? Yes No

Are you willing to participate in program promotion by sharing about your experience and the impact on your practice? Yes No

To be eligible, applicants must be:

- Practicing artists who are working professionally; and
- Residents of Tennessee who are not currently enrolled in a degree-granting program.

I certify that all of the information in this application is true. I understand that this is a competitive application process, and if selected, I commit to fully participate in the program including attending all six training sessions of Periscope at the Nashville Entrepreneur Center on these dates:

- Thu., June 1st, 9 a.m. to 1 p.m.
- Thu., June 15th, 9 a.m. to 1 p.m.
- Thu., June 29th, 9 a.m. to 1 p.m.
- Thu., June 8th, 9 a.m. to 1 p.m.
- Thu., June 22nd, 9 a.m. to 1 p.m.
- Thu., July 6th, 9 a.m. to 1 p.m.

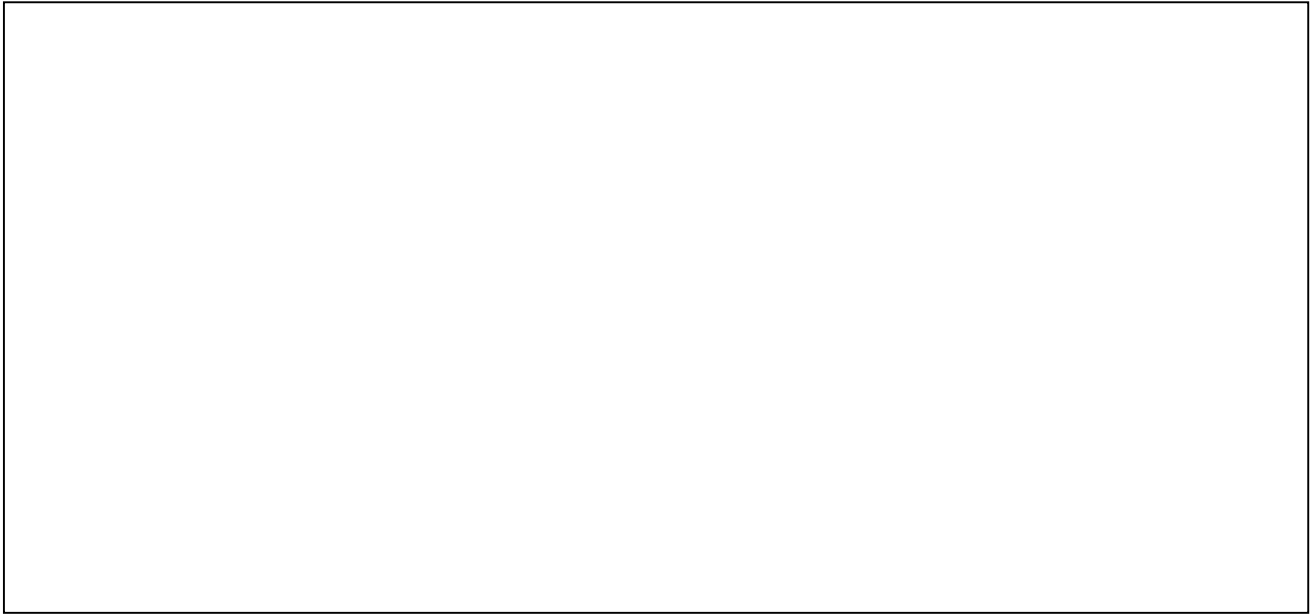
Signature

___ / ___ / _____
Date

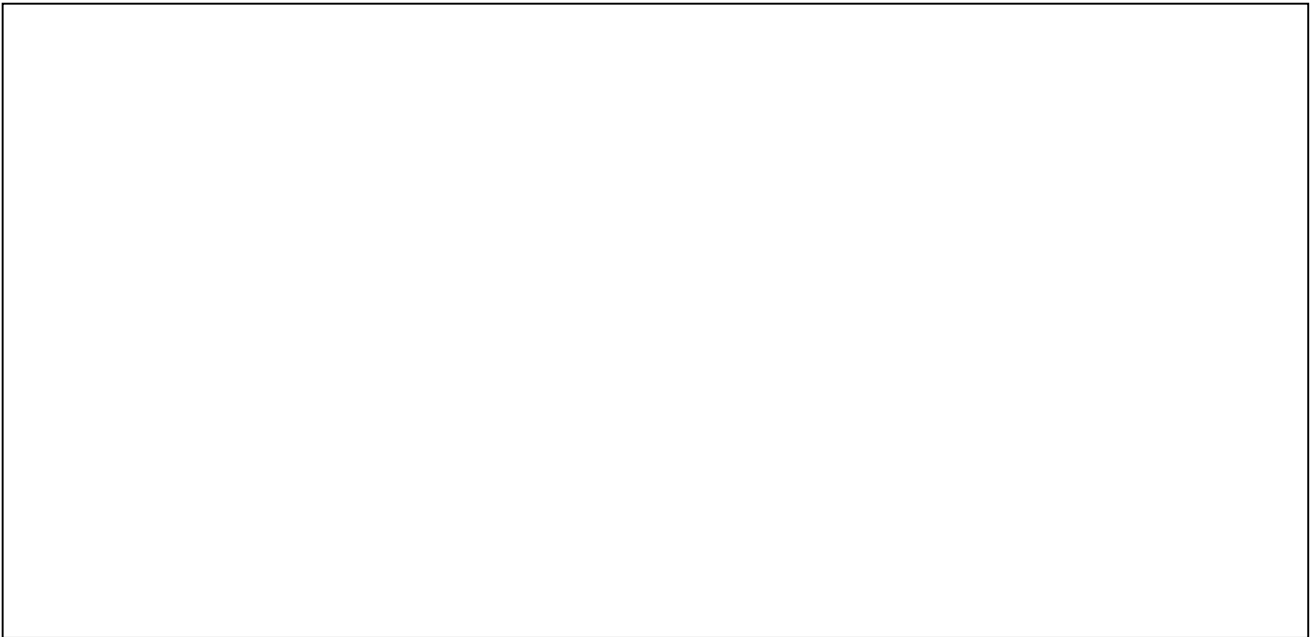
Application Questions (250 Word Max Each):

1. Describe your work and the development of your creative practice.

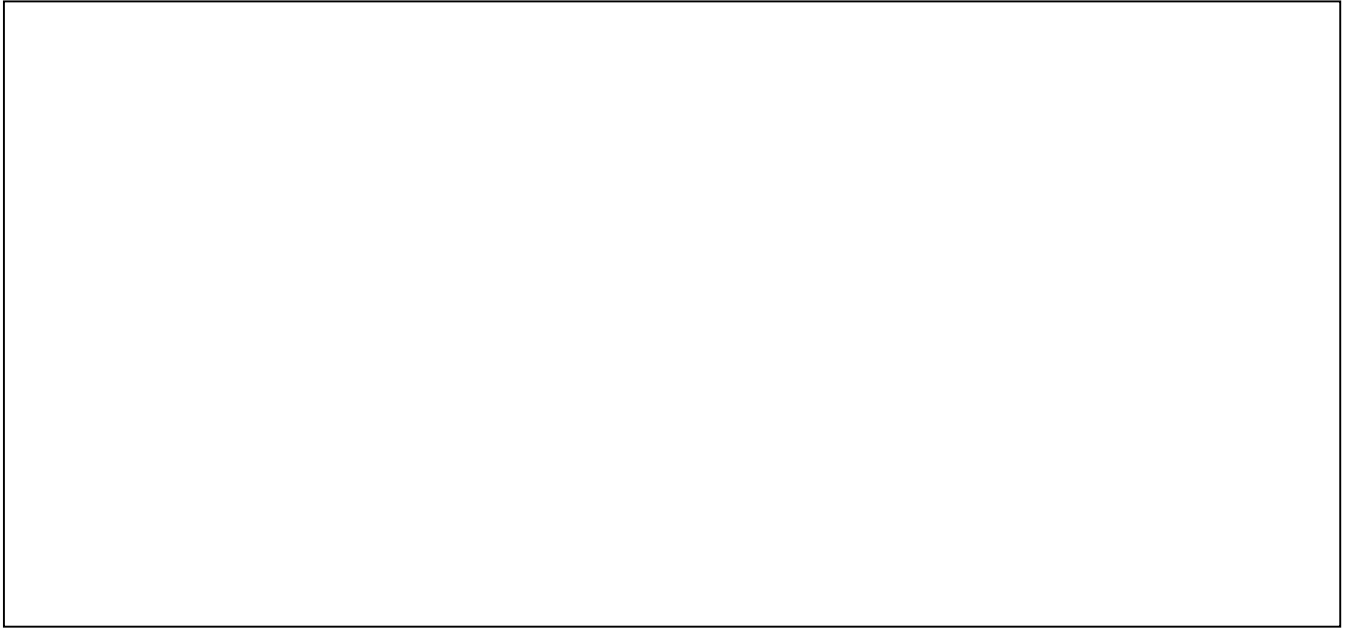
- 2.** Describe the environment/community your artistic practice is a part of. How does your work fit? Who is your competition? How have you worked to maximize your position in this environment?



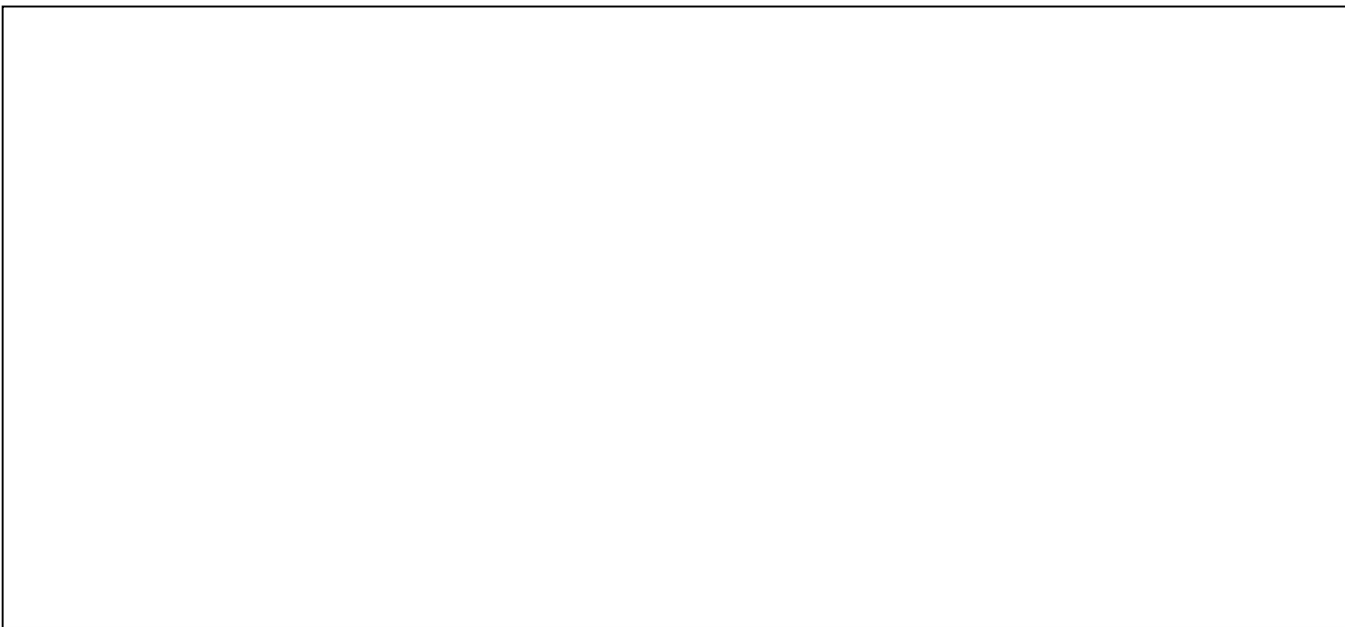
- 3.** What do you want your career to look like five years from now? How do you define success in your arts practice?



4. How do you think this opportunity will help further your career and help you reach your goals? Give two or three specific examples.



5. Talk about the business side of your practice. What do you do well? What do you need to learn? (e.g. I excel at branding but managing money is a real challenge for me.)



6. Do you have any special circumstances that you would like us to consider when reviewing your application?

Applications must be submitted by midnight on Mon., Mar. 6th via email to info@abcnashville.org or as digital files on a CD delivered to the address below. Application Checklist:

- Completed Application
- Sample of Work (see instructions below)
- Resume or Vita (3 pages max.)

Instructions for Sample of Work:

- **Audio or Video:** Sample may not exceed 5 minutes.
Include Title or Description, Medium, Length of the Entire Work, and Date of Completion or Performance
- **Digital Images:** Select up to 4 images that best represent your work.
Include for each, the Title or Description, Medium, Size (L x W x H), and Date of Completion.
- **Manuscripts:** Sample may not exceed 5 pages.
Include Title of Work, Chapter/Section, Date of Completion, Date Published, Publishing House (if applicable)
- **Special Instructions:** Please indicate any special instructions for playing or viewing your work sample.

If you need assistance with completing your application, please contact us at:

Phone: (615) 460 – 8274 | **Email:** info@abcnashville.org

Web: www.abcnashville.org

Mailing Address: Arts & Business Council, 1900 Belmont Blvd., Nashville, TN 37212*

*Note: If dropping off your application in person, please call the ABC office for directions to our physical location.

Periscope Program Partners:

