STUDIO RENTAL APPLICATION

Your contact details Full Name:
Current Address:
City, State, Zip:
Home Phone: () Other Phone: ()
Email Address:
Web site / Portfolio:
Please inform Artworks if your details change. Please check the categories you feel most accurately describe your work.
Your WorkCeramicsGlassMusicPrintmakingSculpture
Film/VideoJewelryPainting:Furniture
Mixed MediaPhotographyFiber ArtGraphics
New Media Other (describe):
Are you interested in participating in Open Studios or other public events hosted by Artworks? Yes No Please explain:
Additional notes:
Your History
Have you declared bankruptcy in the past 7 years? ☐ Yes ☐ No
Have you ever been evicted from a rental property? ☐ Yes ☐ No
Have you had two or more late rental payments in the past year? ☐ Yes ☐ No
Have you ever willfully or intentionally refused to pay rent when due? \square Yes \square N
Have you ever been convicted of a felony? ☐ Yes ☐ No

Personal References

Name:	
Phone: ()	
Address:	
Relationship:	
Name:	
Phone: ()	
Address:	
Relationship:	
Face and the Constant	
Emergency Contact	
Name:	_
Phone: ()	
Address:	
Relationship:	
Representations	
The undersigned represents that all statements set forth in this applica	ition are
true and correct, and acknowledges that Artworks is relying upon these	
statements and representations in deciding whether to accept them as	
The applicant hereby certifies the information above is accurate and gi	
Artworks the right to contact references.	VCS
Altworks the right to contact references.	
Signature	
Date	
Please include:	
This application form, signed and dated.	
Recent resume/artist statement/bio (1 or all).	

A sample of your work (photo, web site URL, etc. No originals please.)

Send to:

Artworks, 19 Everett Alley, Trenton, NJ 08611

Tel: 609-394-9436 info@artworkstrenton.org www.artworkstrenton.org