

# ARTIST IN RESIDENCE PROPOSAL

**Methow Arts 509.997.4004**

PO Box 723, 109 Second Avenue Suites B+C, Twisp, WA, 98856

artseducation@methowartsalliance.org

Today's date	
School	
Grade (s)	
# Students	
Date range of this residency:	

Artists and classroom teachers should collaborate closely to plan a residency with this document. This proposal, once approved, will become the contract between the teaching artist and Methow Arts. Residencies begin **ONLY** after the contract has been signed by all parties. **THANKYOU** for making the arts happen in our schools!

## 1. PLAN

<b>RESIDENCY TITLE:</b>
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<b>ARTIST NAME:</b>	
PHONE:	EMAIL:
ADDRESS:	

<b>TEACHER(S) NAME:</b>	
PHONE:	EMAIL:

RESIDENCY DESCRIPTION AND GOALS		
DESCRIPTION	What will the students do? Please describe the project.	
GOALS	What specific concepts and skills will students learn?	
VOCABULARY	What new words will students learn?	

IMPLEMENTATION & MANAGEMENT		
SPACE	What kind of working space and storage space will you need?	
VOLUNTEERS	Will you need volunteer? How will you schedule them?	
SUPPLIES	What will come from the school, classroom or the Methow Arts Cache?	
SPECIAL NEEDS	What are the considerations for students with special needs and how will they be included?	

ASSESSMENT		PERSON RESPONSIBLE
ASSESS	Assess student learning using Methow Arts student self-assessment tools.	
EVALUATE	Evaluate how the residency went overall using our artist and teacher evaluation tools.	
DOCUMENT	Document residency with students' work, pictures, etc and share with Methow Arts.	
SHARE	Please send a letter home to parents and an article to your school and local newspaper, plan an exhibit or performance in your school or out in the community. We can help with this! Methow Arts has samples you may use.	

## 2. BUDGET

MATERIALS AND SUPPLIES PLANNING	Quantity	X Cost Per Unit	Price OR Source
Total Supplies to Purchase			

ARTIST'S TIME IN THE CLASSROOM (if your hours don't fit here, please detail on page #3)	
Length of each session (hours)	
X number of sessions (per classroom)	
X number of classrooms participating	
Total Classroom Hours for Artist	
X \$30/hr.	
+ Planning Stipend	\$50.00
Total Artist's Fee	

TRAVEL (mileage is reimbursed for artists traveling OUTSIDE of their home districts)	
Round Trip Mileage	
X Number of Trips	
X State rate (.50)	
Total Mileage	

BUDGET TOTALS FROM ABOVE	
Total Supplies	
Total Artist Time	
Total Mileage	
CONTRACT TOTAL	

This agreement is made and entered into between METHOW ARTS and the ARTIST. WHEREAS, it is the desire and intent of the ARTIST to perform the services as an artist in residence under the terms and conditions hereinafter set forth, METHOW ARTS agrees to pay the ARTIST as per this contract. The ARTIST agrees to conduct a teaching residency as outlined above unless otherwise terminated, rescheduled, or extended by mutual agreement of METHOW ARTS and the ARTIST.

In the event that the residency site is damaged, destroyed, or rendered unfit for the activities of the residency, due to fire, strike, act of God, national emergency or other unforeseen event of any kind, this residency shall be either terminated or rescheduled upon the mutual agreement of METHOW ARTS and the ARTIST. Should the ARTIST become unable to provide above services due to severe illness or other debilitating circumstances, it is the responsibility of the ARTIST to notify METHOW ARTS prior to the start of the residency. This agreement will be subject to review by METHOW ARTS and may be terminated without further payment to the ARTIST of the remainder of the term if it cannot be rescheduled at a future date that is acceptable to METHOW ARTS.

ARTIST Signature:	Tax ID:	Background check?
METHOW ARTS Signature:		___ Yes ___ No

### 3. ADDITIONAL PLANNING TOOLS

*This page is included to help plan more complex residencies. It is not required. Use only if it is helpful.*

ARTIST'S TIME IN THE CLASSROOM WORKSHEET		
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Date:	Times:	Hours:
Total Classroom Hours for Artist		

MATERIALS AND SUPPLIES PLANNING	Quantity	X Cost Per Unit	Price OR Source
Total Supplies to Purchase			

SPECIAL NOTES, COMMENTS AND FEEDBACK