



evakahan
foundation

APPLICATION FORM

name:	
artist name (if different):	
place & time of birth:	
citizenship:	
place of residence:	
telephone:	
email address:	
artistic discipline:	
period and preferred start date applied for:	

Please put an 'X' in the box if you attached the following in an electronic form:

- Artist's portfolio (max. 50 MB focusing on the last 3 years)
- A description of the project you want to complete during the artist-in-residence programme (max. 1 page)
- Why would it be important for you to take part in the artist-in-residence programme? (max. 1 page)
- Special help you need for your project from the Dr. Éva Kahán Foundation, if there is any.
- A statement specifying which months in the period between October and May are suitable and which months are absolutely not suitable for you.

Please write your name at the top (if possible) of every page of the attachments. Thank you.

By signing this document, I give my consent for the Dr. Éva Kahán Foundation to process my personal data and use them for information purposes in the future. I acknowledge that I can modify or withdraw my data and my consent to their processing by the data controller in writing any time. The Dr. Éva Kahán Foundation declares that it will always process the data provided hereinabove and any further personal data that may come to its knowledge in compliance with the effective legal regulations and its Privacy Statement.

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Participant

Dr. Éva Kahán Foundation

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