

# Alaska Statewide Teaching Artist Roster (STAR) Application Form

Applicant Instructions:

Submit a completed application to the Alaska State Council on the Arts (ASCA) no later than the Round I Statewide Teaching Artist Roster application deadline (April 15) or the Round II Statewide Teaching Artist Roster application Deadline, each year. Applications may be submitted at any time and will be considered at the next upcoming deadline.

A completed application consists of the items noted on the Statewide Teaching Artist Roster (STAR) Application Checklist. Application materials may be submitted as a paper packet, on a USB drive, or as attachments to an email. Applications may be submitted by mail, or in person addressed to:

Alaska State Council on the Arts

Attn: AIE Program, STAR

161 Klevin Street, Suite 102

Anchorage, AK 99508

-or-

Via email to laura.forbes@alaska.gov.

We are unable to accept faxed applications. If you are sending your application via email, please include “STAR Application” and your name in the email subject line.

Application materials submitted via email or saved to a drive and submitted, should be clearly labeled in the digital file names. An example of a file name that will help ensure that your application is received and understood is: “STAR-Application\_YourName\_attach-1-of-5.” The reviewer would understand from this file name what the material is for (STAR application), who it belongs to (YourName), and that it is the first file of five, to be received. If you email or submit a drive with a single document, please be sure the document includes “STAR application” and your name in the document file name.

Applicant materials must be compatible for reading with a windows-based PC; Microsoft file types and PDF are preferred. Images, audio and video should be linked, where possible. File Transfer sites like Dropbox or Google Drive may not be accessible to application reviewers, so please contact the program officer before submitting materials via FTP sites. Contact Laura Forbes, Arts Education Program Director at ASCA with questions about how best to submit your application materials—including work samples—if you are unsure.

Email laura.forbes@alaska.gov or call (907) 269-6682, with questions, concerns or for technical assistance; in particular, please contact us right away if the application materials and requested submission process present a barrier to access for an eligible applicant.

Please keep a copy of your application materials, for your own reference.

# STAR Application Cover Sheet + Checklist

Complete the Application Cover Sheet + Checklist—either typed or in legible hand-printing. This should be the first document in your STAR application materials.

### Applicant Contact Information

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| Complete this table with your information as an individual teaching artist. Enter your responses in the right side/second column of the table. |
| **Full legal name:** |  |
| **Preferred name:** |  |
| **Community of residence:** |  |
| **Mailing address:** |  |
| **City, State, Zip code:** |  |
| **Contact email address:** |  |
| **Contact phone:**  |  |
| **Web site:** |  |
| **Any other links to sites/social media channels which represent your work as an artist?** |  |
| **How do you prefer to be contacted?**  |  |

### STAR Application Checklist

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| This table describes the specific documents/materials that make up an application to the Statewide Teaching Artist Roster (STAR). In the right side/second column of this table please add a **√,** x,or other mark to indicate you have completed the listed item, and it is included with your application materials**.** |  |
| **STAR Application Cover Sheet + Checklist** (this page of the application form) |  |
| **Eligibility, Discipline, Specialization + Certification** (page 3-4 of the application form) |  |
| **View Statement** (See the STAR Guidelines for information about the View Statement. This is the brief statement describing your practice to be included in the STAR catalog.) |  |
| **Artist Statement (**See the STAR Guidelines for information about the Artist Statement. Must be *no more than 2 pages long* with a font size no smaller than 11 point.) |  |
| **Current Resume** (Include an artist resume that includes your recent work as an artist, teaching artist and educator. Include any education/training that speaks to your experience and ability to work as a teaching artist.) |  |
| **Artist Work Samples** (See the STAR Guidelines for information about the Artist Work Samples. Work samples should emphasize your work as a practicing artist and may include samples related to your teaching artist practice.) |  |
| **Sample Lesson Plan** (See the STAR Guidelines for information about the Sample Lesson Plan. Lesson plans should provide insight into a classroom-based lesson, or outline of a classroom-based residency project, led by you, for Alaska students and teachers.) |  |
| **Letters of Recommendation** (See the STAR Guidelines for suggested focus of letters. Submit at least 2 and no more than 3 letters of recommendation that speak to your recent work as a practicing artist and teaching artist.) |  |
| **Two Elective Attachments** (See the STAR Guidelines for suggestions.) |  |

# STAR Eligibility, Discipline, Specialization + Certification

Complete the Application Eligibility, Discipline, Specialization + Certification—either typed or in legible hand-printing. This should be the second document in your STAR application materials.

### STAR Eligibility

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| **Yes** | **No** | Please check yes or no, adding a **√,** x,or other mark in the left side/first column of this table to indicate your response to each question, below. These questions regard eligibility and suitability to work as a Teaching Artist within public, private or community-based educational environments.  |
|  |  | Are you currently a resident of Alaska? |
|  |  | Are you in residence in the State of Alaska at least six months of each year? |
|  |  | Can you provide a W-9 and Social Security Number (SSN) or Individual Tax Identification Number (ITIN) should it be requested by ASCA, or by an organization employing you as a Teaching Artist?  |
|  |  | Are you able to pass a criminal background check, indicating you are not barred from working with children, the elderly or vulnerable adults, should it be requested by ASCA or by an organization employing you as a Teaching Artist? |

### Primary Art Discipline

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| --- | --- |
| **Check here**  | Check the primary discipline in which you practice your art form(s), adding a **√,** x,or other mark in the left side/first column of this table. For purposes of the STAR application, you will be asked to submit work samples for each of the primary disciplines you check on this list (one set of samples may satisfy multiple disciplines). Identification of your primary discipline offers a way for those reading the STAR to search within defined categories of art discipline.  |
|  | Craft |
|  | Dance |
|  | Folk & Traditional Visual Arts (including Alaska Native traditional art forms) |
|  | Folk & Traditional Performing Arts (including Alaska Native traditional art forms) |
|  | Literary Arts |
|  | Media Arts |
|  | Music |
|  | Theatre |
|  | Visual Arts |

### Specialization

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| In the space provided, below, please briefly describe your specialization (s) within the broad categories of primary discipline you noted, above. Describe more specifically the medium, form and genre of art(s) you practice. For example, an artist who checked “Media Arts,” above, might specify that they are a film artist; an artist who checked “Literary Arts” and “Theatre,” above might describe themself as a performance poet.  |
|  |

**Other Alaska Artist Rosters**

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| Are you currently on any local Teaching Artist Rosters or other artist rosters in Alaska? Please list in the space below, any other artist rosters of which you are a part and add any web links to where these rosters/your profile may be found, online.  |
|  |

### Information about Teaching Artist Preferred Settings and Populations

*In the three tables, below, please note your preferences as to the settings and populations within which you are most interested to work as a teaching artist. We recognize these preferences change over time. In each preference table, add a* ***√,*** *x,**or other mark in the left side/first column of this table to note your preference.*

|  |  |
| --- | --- |
| **Check here**  | Teaching Artist Preference - Age Groups: with which age ranges do you prefer to work as a teaching artist?  |
|  | All Ages |
|  | Early Childhood |
|  | Elementary (grades K-6) |
|  | Middle School (grades 6-8) |
|  | High School (grades 9-12) |
|  | Young Adult (ages 16-24) |
|  | Adult (ages 18 and older) |
|  | Mature Adult (ages 65 and older) |

|  |  |
| --- | --- |
| **Check here**  | Teaching Artist Preference – Type of Engagement: which of the following types of school or community engagement opportunities are part of your teaching artist Practice?  |
|  | Presentations/Performances (single, short presentation or performance format) |
|  | Workshop (one or two day limited workshop) |
|  | Short Term Residency (2-5 days) |
|  | Longer Term Residency (more than 5 days; most Artists in Schools residencies are at least two weeks in length) |

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| **Check here**  | Teaching Artist Preference – Geographic Range: in which of the following geographic ranges do you prefer to practice? |
|  | I only prefer to practice locally. |
|  | I will practice in communities in my geographic region. |
|  | I will practice anywhere in the state of Alaska.  |

### Emergency Contact Information

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| Complete this table with contact information of a person who would be an emergency contact for you, should your application to the STAR be accepted.  |
| **Emergency Contact Name:** |  |
| **Preferred name:** |  |
| **Community of residence:** |  |
| **Contact email address:** |  |
| **Contact phone:**  |  |

**Certification:** I hereby certify that all information made on or in connection with this application is true and complete to the best of my knowledge. I understand that any misrepresentation or concealment of pertinent material fact will be sufficient grounds for rejection of my application. I give approval that my name, contact information and view statement appear on the Alaska Statewide Teaching Artist Roster (STAR), should review of my application result in acceptance to the STAR. I agree to notify ASCA of any changes in my address, telephone number, email address, and/or availability, should my application be accepted.

**Applicant Signature**:

 Date