FEDERATION OF CANADIAN ARTISTS

1241 Cartwright Street, Vancouver, BC V6H 4B7, Canada Email: education@artists.ca T.: 604-681-2744 F.: 604-681-2740 www.artists.ca

Name:				
Tel:				
Email:				
Website:				
TITLE OF PROPOSED WORKSHO	OP:			
Proposed Date(s):				
Proposed Times:	From:	To:		
WORKSHOP OUTLINE Please state the nature of y determine the demand for yo	our workshop and a l		This information is	used to

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Workshop Objectives
Please state briefly the intended outcomes and benefits of your proposed workshop:
SPECIAL REQUESTS
Would you require any special equipment or requests for your class? (For example: projector and
screen, a stage for a model, room for still life set-up, access to multiple power outlets, early/late
studio access for setup). If so please detail:
Please accompany this proposal with:
riease accompany triis proposar with.
☐ Artist/Instructor Resume and Biography
☐ 5 JPEG image relevant to your class that can be used for promotion. At least one should be of
yourself, by way of headshot or of you at work. Proposals without accompanying images will be
determined as incomplete. Incomplete proposals will not be considered.
A preliminary workshop supply list outlining all materials, mediums and tools that your students
will need to bring and/or purchase for the class. Please also outline if the students need to bring
their own easel, or if they will be working table-top, or if they can choose either.