

2007 Bronx Recognizes Its Own (BRIO) Application Excellence in Arts Award

Application Deadline: January 26, 2007

SUBMIT ONLY ONE (1) APPLICATION

1. Name (Mr. Ms. Mrs.): _____
first last

2. Home Address: _____ **BRONX, NY** _____
Apt.# Zip Code

3. Mailing Address: _____
Apt.# City/ST. Zip Code

4. Telephone: _____
day home fax

5. Email: _____

6. Social Security Number: _____ / _____ / _____ 7. Date of Birth: _____ / _____ / _____

8. Districts:

Go to www.nypirg.org for a complete listing. You may also call the Board of Elections at 718-299-9017 for the district numbers of your legislators and the Community Affairs Office at the Borough President's Office at 718-590-6005 for community planning board numbers.

State Assembly # _____ State Senate # _____ City Council # _____ Congressional District # _____
 Community Planning Board # _____

9. AREA IN WHICH YOU ARE APPLYING (You may only apply in ONE category. Select only one box.):

- | | | | |
|---|---|---|---|
| <p><u>Literary Arts</u></p> <p><input type="checkbox"/> Fiction</p> <p><input type="checkbox"/> Non-Fiction</p> <p><input type="checkbox"/> Playwriting</p> <p><input type="checkbox"/> Poetry</p> <p><input type="checkbox"/> Screenwriting</p> | <p><u>Performing Arts</u></p> <p><input type="checkbox"/> Acting</p> <p><input type="checkbox"/> Choreography</p> <p><input type="checkbox"/> Dance</p> <p><input type="checkbox"/> Instrumental Music Performance</p> <p><input type="checkbox"/> Music Composition</p> <p><input type="checkbox"/> Performance Poetry</p> <p><input type="checkbox"/> Storytelling/Spoken Word</p> <p><input type="checkbox"/> Vocal Music Performance</p> | <p><u>Visual Arts</u></p> <p><input type="checkbox"/> Crafts</p> <p><input type="checkbox"/> Illustration/Drawing</p> <p><input type="checkbox"/> Installation Art</p> <p><input type="checkbox"/> Mixed Media</p> <p><input type="checkbox"/> Painting</p> <p><input type="checkbox"/> Performance Art</p> <p><input type="checkbox"/> Photography</p> <p><input type="checkbox"/> Printmaking / Artist Books</p> <p><input type="checkbox"/> Sculpture</p> | <p><u>Media Arts</u></p> <p><input type="checkbox"/> Digital Arts</p> <p><input type="checkbox"/> Documentary Film/Video</p> <p><input type="checkbox"/> Film Animation</p> <p><input type="checkbox"/> Narrative Film/Video</p> |
|---|---|---|---|

10. Fellowships, Awards, and/or Grants

Name	Year/Amount
_____	_____
_____	_____

11. Return of Materials

NOTICE: No materials will be returned by mail. Do not send a SASE. Literary manuscripts will be recycled. All other material will be held at the BCA office until September 20, 2007, and may be picked up **BY THE APPLICANT** and **BY APPOINTMENT ONLY**.

I understand the above conditions. _____
Signature

12. Certification: The foregoing statements are true and complete to the best of my knowledge:

 Signature Date

For BCA use only:

ROM: S P N app# _____ disc _____ disc# _____ COM. APP. Y N _____

POR: Y N _____ ACK: Y N SM: S M V A C Res: Y N Bio: Y N

CHECKLIST of ARTWORKS – For Visual Artists Only

Please type or print clearly

CODE: _____

1. TITLE OF WORK _____
MEDIUM _____
DIMENSIONS _____
DATE WORK COMPLETED ___ / ___ / _____

2. TITLE OF WORK _____
MEDIUM _____
DIMENSIONS _____
DATE WORK COMPLETED ___ / ___ / _____

3. TITLE OF WORK _____
MEDIUM _____
DIMENSIONS _____
DATE WORK COMPLETED ___ / ___ / _____

4. TITLE OF WORK _____
MEDIUM _____
DIMENSIONS _____
DATE WORK COMPLETED ___ / ___ / _____

5. TITLE OF WORK _____
MEDIUM _____
DIMENSIONS _____
DATE WORK COMPLETED ___ / ___ / _____

Bronx Council on the Arts
1738 Hone Avenue
Bronx, New York 10461
718 - 931 - 9500
www.bronxarts.org

