

SKNCIR – VISUAL ARTS (VA) REGISTRATION FORM



REF#: _____

BASIC INFORMATION

Name (First): _____ (Last): _____ Date (d/m/y): _____

Address: _____ Country of Residence: _____

Gender: (M): _____ (F): _____ Birthdate (d/m/y): _____ Country of Birth: _____

Phone Number(s): Cell #: _____ Work #: _____ Home #: _____

Email Address: _____

PROFESSIONAL SKILL(S) / SERVICE

Visual Arts Skill #1: _____ No. of Years Applying Skill: _____

Visual Arts Skill #2: _____ No. of Years Applying Skill: _____

Registered Business: (Yes): _____ (No): _____ Year Started: _____

Business Name: _____ Business Address: _____

Website: _____ Facebook: _____

Internet Site(s): YouTube: _____ Twitter: _____

Soundcloud: _____ Other: _____

Reference (List 1 Person Who Can Verify Your Professional Skills/Services – Name, Cell, Email) + Letter of Reference

1 _____

EVIDENCE OF YOUR SKILL(S): Applicants must submit a Portfolio that demonstrates their Skill, Talent, Product (Videos, Photographs, Media Links, etc.)

EDUCATION/ACHIEVEMENT CERTIFICATES: If applicable, Applicants must provide photocopies of Certificates, or Awards received for their Creative Skill, Talent, Product or Service.

PLEASE SEE BACK OF PAGE FOR ADDITIONAL INFORMATION NEEDED 

RETURN FORM TO: St. Kitts Department of Culture, Palms Building, The Circus Basseterre
RDU Tel: 1 (869) 467-1396 | Email: skncir@gov.kn | Website: www.skncir.gov.kn

