Ⅰ- APPLICANT INFORMATION FORM\_ORGANIZATION

① **ORGANIZATION OVERVIEW**

APPLICATION RECEIPT NUMBER

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| NAME OF ORGANIZATION |  | | | | | |
| NAME OF REPRESENTATIVE |  | | | | TITLE OF REPRESENTATIVE |  |
| ORGANIZATION (OFFICE) ADDRESS | | | | | TEL |  |
|  | | | | | FAX |  |
| E-MAIL |  |
| WEBSITE | |  | | | ORGANIZATION TYPE |  |
| DATE OF ESTABLISHMENT |  | | | MAIN GOVERNMENT DIVISION | |  |
| STRUCTURE | LIST OF EXECUTIVES | | | NUMBER OF MEMBERS:  MAIN MEMBERS：  (EXCEPT EXCECTUIVE MEMBERS LISTED LEFT)  PARTICIPATION REQUIREMENTS ： | | |
| TITLE FULL NAME | | |
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| OBJECTIVE / SPECIALITY | Please simply describe the objective of the organization and specialties in its operation and activities. | | | | | |
|  | | | | | |
| HISTORY/ BACKGROUD | Please simply describe the brief history and renowned achievements of the organization since its establishment. | | | | | |
|  | | | | | |
| AWARDS WON BY ORGANIZATION |  | | | | | |
| PERSON IN CHARGE OF APPLICATION | | CONTACT INFORMATION OF PERSON IN CHARGE | | | POSTAL MAILING ADDRESS | |
|  | | TEL/MOBILE |  | |  | |
| FAX |  | |
| E-MAIL |  | |

Ⅰ- APPLICANT INFORMATION FORM\_ORGANIZATION

②**PROFILE OF MAIN PERSONNEL OF THE PROJECT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NAME  (REAL NAME) |  | NAME (ARTIST NAME) |  | |
| PRESENT POST |  | DATE OF BIRTH | . . | AGE: |
| GENDER |  | |
| MAJOR EXPERIENCES  appendix applicable  if necessary | YEAR/MONTH –  YEAR/MONTH EDUCATION/PROFESSIONAL EXPERIENCES/ORGANIZATIONS | | | |
| 2010.April - Graduated with B.A., ◯◯◯◯ University, Department of ◯◯◯, Major in ◯◯, Minor in ◯◯  2014.March | | | |
| 2014. April -  Graduated with M.F.A., ◯◯◯ University, Department of ◯◯◯, Major in ◯◯, Minor in ◯◯  2016. March | | | |
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| MAJOR EXHIBITIONS/AWARDS/GRANT | | | |
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