



## STUDIO POTTER APPLICATION

(Please print)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (h) \_\_\_\_\_

(c) \_\_\_\_\_

Email: \_\_\_\_\_

Years of Experience: \_\_\_\_\_

Please list your experience (classes, studios, teachers)

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Have you ever worked for a studio?    Y        N        If Yes, which studio? What were your duties? \_\_\_\_\_

Describe your clay work: \_\_\_\_\_

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