

## Application for IGMA Independent Study Grant

Name:				
Address	3:			
Contact	Information:			
Contact	a information.			
Home:				
Cell:		Call?	or Text?	
Email:				
Please i	ndicate your preferred mode of communication.			
Area(s) of expertise in miniatures:				
Your proposed departure or expansion of areas of interest. (What would this grant help enable you to achieve?)				
Other relevant information regarding your involvement and experience in miniatures, for example: teaching experience; development or introduction of new techniques, media, tools or equipment; leadership in organizations devoted to miniatures; publicizing the concept of miniatures as an art form.				

## The Research Project

1. Please describe in some detail the project or course of study that you are proposing. Include specifics regarding how this would be a departure from your previous miniature experiences. This can include, but not be limited to, location, media, technique, equipment and subject matter. Include the names of individuals and/or institutions and location(s) involved in this research. (Use additional pages if necessary.)

- 2. What will be the proposed outcome of this research? This might be an actual piece, a new process or technique for working in miniature, a means of more effectively disseminating the concept of "miniatures as an art form" or any other meaningful result you might propose.
- 3. What will be the benefit to the Guild? This 'quid pro quo' could be using the experience to teach a class at a Guild sponsored event, producing a lecture presentation at one of these venues, a video or Powerpoint presentation for use by the Guild, an article in a Guild publication or the donation of an example of your work for auction at the School or Show.

<b>Costs:</b> Describe and estimate as closely as p terms of:	ossible, the cost of your rese	arch in
Transportation     Includes coach airfare, auto rental, mile	s to be driven, rail pass.	\$
2. Lodging Anticipated number of nights related to research.	days directly involved in	\$
3. Food Anticipate number of meals (as in #2)		\$
4. Other Admission costs, materials, etc. Purchase covered by the grant.	e of equipment will not be	\$
	Total	\$
Please be aware that if a private collection or musupermission" will have to be submitted before the Successful applicants will be expected to complete	e stipend will be granted.	
(up to 18 months) and will not be eligible to reapp		*
Signature:	Date:	
Return applications to:		
Christine Pratt – ISP Chair	– ISP Chair E-mail: <u>c2r2p2@aol.com</u>	
2175 South Road Bradford, VT 05033	Telephone: 802-222-357	77