



**THE OHIO STATE UNIVERSITY FACULTY CLUB ART PROGRAM  
APPLICATION FORM**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

Please check all that apply to you:

OSU Alumni \_\_\_\_\_ Year of Graduation \_\_\_\_\_ Degree(s) \_\_\_\_\_

OSU Faculty \_\_\_\_\_ Department \_\_\_\_\_

OSU Staff \_\_\_\_\_ Position \_\_\_\_\_

Did you attend OSU but not graduate? If so please indicate the years. \_\_\_\_\_

Please provide a brief description of your work:

Please indicate 2-month time periods when art is available for an exhibition.

January – February \_\_\_\_\_ March – April \_\_\_\_\_ May - June \_\_\_\_\_  
July – August \_\_\_\_\_ September – October \_\_\_\_\_ November – December \_\_\_\_\_

Please indicate sale price range for your artwork:

List special concerns: installation, delivery, etc.

Do you have gallery representation?: \_\_\_\_\_ No \_\_\_\_\_ Yes, I am represented by \_\_\_\_\_

**Please submit a DVD or high resolution jpg images or photographs of 8 to 10 selections of the work available for exhibition to [Lisa@ohio-statefacultyclub.com](mailto:Lisa@ohio-statefacultyclub.com) . Also requested are resume, curriculum vitae and exhibition list.**

Mail or deliver materials to:  
Lisa Craig Morton, Art Coordinator  
The Ohio State University Faculty Club  
181 South Oval Drive  
Columbus, Ohio 43210-1396

614-292-2262 (Club Office)  
614-294-2849 (Home Office)  
614-309-0191 (Cell Phone)