



# FIRST CLASS 14

LAKE MACQUARIE CITY ART GALLERY

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## NOMINATION AND PERMISSION FORM

To be completed by you (the **teacher**), your **student** and their **parent/guardian**.

### Nominate work/s for possible selection, which meet the following criteria:

- Achieves High Band 5 or Band 6 in school-based assessment
- Shows evidence of accomplished technical skill
- Is successful and engaging with high degree of resolution
- Explores personal values and beliefs through social and cultural enquiry

### PLEASE NOTE:

Works nominated for *ArtExpress* preselection **ARE** eligible for *First Class 14*.

**HOWEVER** if the work is accepted for the *ArtExpress* exhibition tour the gallery must be notified **IMMEDIATELY**.

If contact information is incomplete the nominee may be deemed ineligible.

**TO RETURNED BY Friday 7 November 2014 to:**

**Meryl Ryan**

**Curator**

**Lake Macquarie City Art Gallery**

**1906 HRMC NSW 2310**

T: 02 49658260

E: [mryan@lakemac.nsw.gov.au](mailto:mryan@lakemac.nsw.gov.au)

W: [artgallery.lakemac.com.au](http://artgallery.lakemac.com.au)

**THE ARTIST**

**Sections marked \* are mandatory**

**IMPORTANT please PRINT clearly and check accuracy, currency and spelling**

\*STUDENT NAME:..... Male / Female (circle)

\*Do you identify as Aboriginal or Torres Strait Islander? ..... Yes / No (circle)

**STUDENT CONTACT DETAILS:**

\*Home Address:.....

.....Post Code:.....

\*Tel:..... \*Mob:.....

\*Email 1 (most frequently accessed):

.....

\*Email 2 (alternative email, ie parent):

.....

**THE SCHOOL**

\*SCHOOL NAME: .....

\*Tel:..... Mob:.....

\*Email:.....

\*VISUAL ART TEACHER NAME.....

\*Tel:..... Mob:.....

\*Teacher Departmental Email.....

OR

\*Teacher Email 2 (most frequently accessed): .....

**THE WORK**

Please PRINT clearly:

**Work Title:** (check accuracy, including preferred use of upper / lower case, and spelling)

.....

**Year:** 2014

**Materials (NB detailed itemised list:** eg plastic, timber, thread, human hair, NOT 'mixed media')

.....

.....

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**Number of pieces in total:** .....

Dimensions (size) of entire work in **centimetres** in the order **height/width/depth:**

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Preferred elements of the Body of Work, if the curators decide it cannot be shown in its entirety:

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.....

Dimensions of those nominated elements: .....

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.....

## REPRODUCTIONS OF THE WORK

Please provide **digital images of the work** on a **disc** or **USB**.

- Include details as well as at least one image of the complete body of work for viewing during the exhibition selection process.
- The best of these images should be hi-resolution files (300dpi and a reasonable size) for possible use as reproductions in promotional material if selected for the final exhibition.

## ARTIST'S STATEMENT

(75 words approx.) **NB** if there is no statement please write '**no statement**'

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**FOR PARENT/GUARDIAN:**

If the nominated work described above by

.....( student/artist name)

is selected for the *First Class 14* exhibition to be held at Lake Macquarie City Art Gallery in 2015,

I ..... (parent / guardian name)

give my permission for that same work to be hung in the Gallery.

- We understand that nomination does not guarantee final selection.
- We understand the Body of Work may not be shown in its entirety and have nominated preference of essential pieces for inclusion.
- We understand every effort will be made to contact the artist to inform the artist of the decision to show a selected portion of the Body of Work before exhibition installation.
- We give permission for the selected work to be reproduced, in part, or whole, in promotional material.
- We agree to allow the Gallery to attach hanging devices to the work where necessary.
- We give permission for the artist’s statement to be edited, especially if it exceeds the requested 75-word limit.
- The student artist is willing to be interviewed regarding the work for the purposes of possible inclusion in the catalogue essay, and for promotion of the exhibition.
- We agree to deliver the works to Lake Macquarie City Art Gallery on the nominated date and will collect the works on a required day at the completion of the exhibition.

**SIGNED:**

Parent/Guardian: .....Date.....

NAME [PLEASE PRINT]: .....

Student Artist: .....Date.....

NAME [PLEASE PRINT].....

**TIMELINE**

<b>Collation of NOMINATION FORMS</b>	<b>Monday 10 November 2014</b>
<b>Selection of work by curators</b>	<b>December 2014</b>
<b>Delivery of work to Gallery</b>	<b>January 2015</b>
<b>Exhibition Dates</b>	<b>11 February – 1 April 2015</b>