

Department of Development

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City Hall  
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New Rochelle, NY 10801  
[www.newrochelleny.com](http://www.newrochelleny.com)

## “NRNY” Sculpture Art Contest Team Application

**\*Please complete this application if you are signing up as a Team Applicant. If you are signing up as an Individual, please complete the Individual Application.**

Applications may be submitted by email to [tcastald@newrochelleny.com](mailto:tcastald@newrochelleny.com). Applications may also be submitted by mail to: City of New Rochelle Department of Development, 515 North Avenue, New Rochelle, NY 10801.

### Team & Team Member Information

Team Name: \_\_\_\_\_ Number of team members: \_\_\_\_\_

#### Team Leader (Member No. 1)

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age of Applicant: \_\_\_\_\_

If Applicant is not over 18, please provide Parents/Guardians Information below.

Parents/Guardians Name(s): \_\_\_\_\_  
Parents/Guardians Phone Number(s): \_\_\_\_\_  
Relationship to Team Member(s) (teacher, coworkers, friends, etc.) \_\_\_\_\_

#### Educational Information

Is the applicant currently a student? Yes \_\_\_ No \_\_\_

Name of High School: \_\_\_\_\_  
Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_

Name of College (Undergraduate): \_\_\_\_\_  
Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

Name of College (Graduate): \_\_\_\_\_  
Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

**Employment Information**

Is the applicant currently employed? Yes \_\_\_\_ No \_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

**Team Member No. 2:**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age of Applicant: \_\_\_\_\_

If Applicant is not over 18, please provide Parents/Guardians Information below.

Parents/Guardians Name(s): \_\_\_\_\_

Parents/Guardians Phone Number(s): \_\_\_\_\_

Relationship to Team Member(s) (teacher, coworkers, friends, etc.) \_\_\_\_\_

**Educational Information**

Is the applicant currently a student? Yes \_\_\_\_ No \_\_\_\_

Name of High School: \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_

Name of College (Undergraduate): \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

Name of College (Graduate): \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

**Employment Information**

Is the applicant currently employed? Yes \_\_\_\_ No \_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

**Team Member No. 3 (if necessary):**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age of Applicant: \_\_\_\_\_

If Applicant is not over 18, please provide Parents/Guardians Information below.

Parents/Guardians Name(s): \_\_\_\_\_

Parents/Guardians Phone Number(s): \_\_\_\_\_

Relationship to Team Member(s) (teacher, coworkers, friends, etc.) \_\_\_\_\_

### Educational Information

Is the applicant currently a student? Yes \_\_\_ No \_\_\_

Name of High School: \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_

Name of College (Undergraduate): \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

Name of College (Graduate): \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

### Employment Information

Is the applicant currently employed? Yes \_\_\_ No \_\_\_

Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

### Team Member No. 4 (if necessary):

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age of Applicant: \_\_\_\_\_

If Applicant is not over 18, please provide Parents/Guardians Information below.

Parents/Guardians Name(s): \_\_\_\_\_

Parents/Guardians Phone Number(s): \_\_\_\_\_

Relationship to Team Member(s) (teacher, coworkers, friends, etc.) \_\_\_\_\_

### Educational Information

Is the applicant currently a student? Yes \_\_\_ No \_\_\_

Name of High School: \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_

Name of College (Undergraduate): \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

Name of College (Graduate): \_\_\_\_\_

Year of Graduation/Anticipated Year of Graduation: \_\_\_\_\_ Degree: \_\_\_\_\_

**Employment Information**

Is the applicant currently employed? Yes \_\_\_\_ No \_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

**Artwork Information**

Name of Artwork: \_\_\_\_\_

Description of Artwork (Please include a detailed description of the artwork, clearly identifying the major elements of the piece):

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If chosen, what is the anticipated timeframe to start the project and to complete the project?

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Please identify the estimated cost of the artwork. \_\_\_\_\_

Please describe any previous experience(s) working on public art project(s). Please provide photos if possible.

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I (we) certify that the information provided in this application is accurate and free from any material misstatements.

**Team Leader (Member No. 1):**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian (if applicant is under 18):**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Team Member No. 2:**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian (if applicant is under 18):**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Team Member No. 3 (if necessary):**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian (if applicant is under 18):**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Team Member No. 4 (if necessary):**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian (if applicant is under 18):**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_