

OPA Artist Within Education Placement & School Agreement

Please complete the following form to establish terms and conditions for the artist in residency. Name of Artist Within Education Placement **EMAIL PHONE** Name of Teacher/Onsite Coordinator **EMAIL PHONE** Name of School/ Facility Address: City: Zip: AWE & Teacher/Onsite Coordinator: Work together to establish the agreed upon terms below What is the duration of the Artist Within Education Placement? Start Date: End Date: What days of the week will the AWE be onsite? Monday Tuesday Wednesday Thursday Friday How many hours a day, and from what time to what time? Hours daily: Start Time: End Time:

What space will be available for the artist in residence to use during the duration of this project?	
Where will the student's work be fired?	
What materials are available to the AWE to use with students the school? Example: Pencil and paper	at are already available at the
What materials does the OPA AWE need to provide for students?	,
What are the main skills students will be gaining from this experience?	
What are the main themes and ideas for this experience for students?	
All parties below have reviewed and agreed to the terms above for the artist in residence program.	
I am aware of the state requirement that teachers remain with their students while artists are engaged in the project.	
Administrator's Signature:	Date:
Teacher's Signature:	Date:
Artist's Signature:	_ Date:
OPA AWE Coordinator Signature: Pilar Swanson	Date: September 8th, 2023