Arts Awards Service The Canada Council 99 Metcalfe Street P.O. Box 1047 Ottawa, Ontario, K1P 5V8	291 Français au verso
The Canada Council requires only one copy of this application form, completed in black type to facilitate duplication. Before completing the form, please read the <i>Grants to Artists</i> brochure.	E Shaded squares are for office use only
1. This application form serves all areas in which the Arts Awards Service holds juri	es. Check the one most appropriate to
your practice. Architecture Criticism and Curating (visual arts, media arts) Dance Music Music Nusic	Writing
2. Specialty (e.g., composition, sculpture, piano, etc.) It Mand Doo R	a) Oureism: Mand Alas
 If you have previously applied to the Canada Council for assistance, please state the type of application. Are you current any other category Mon Fighter Dowend - 1989. If so, specify. 	tly applying or do you intend to apply for of Council assistance?
5. Applicant (for the Salome Dancer)	6. Year of birth:
PHE	1928
SURNAME	P male female
Given names (underline initials or names normally used)	7. Citizenship:
Felix B.	Canadian citizen
Former name, if applicable	
8. Permanent address in Canada: (Please notify of any changes) Street address Apt. no.	Permanent resident of Canada since (month and year):
City Province 75ROV7. 403 4839308. 4924588 (W-fe's Area code Telephone Business hrs. telephone SV	Permanent residents must attach copy of evidence of their legal status unless documentation has been submitted to the Arts Awards Service within the past three years.
9. Present address if different from above: (Please notify of any changes)	10. Employment:
Street address <u>8115 Frank in Ave</u> Alberta & <u>City</u> Province <u>Country</u> / Postal code	Present occupation Supph h / Sturfer
403 791-4800 T9H2H7. Area code Telephone Business hrs. telephone	Ten and Olepe.
11. City(ies) or town(s) where you plan to carry out your project:	
Edmenton (Har	(mercard)
12. Amount requested	Parto
Subsistence (maximum of \$1,500 a month): month(s) at \$ =	\$\$000.
Project costs (Give breakdown of materials, tuition, rental of equipment, etc. on separate sheet)	\$ 1000 \$ 1000
Travel costs (Give itinerary with dates and purpose of travel on separate sheet)	\$\$
Total (maximum \$18,000)	\$\$_(0 \$-500.
13. Give precise dates to show length of project. (Results of the October competition later than March, and of the April competition no later than September. Results of the Decision music are announced at the beginning of June.) From 4 a 1951 to 0.061	

3 Name of applicant CHER WLADSKY 18. List your main professional achievements to date and attach a curriculum vitae. au verso Enclosed: Summansed CV. Hod Jack & Dance Conference ~ New York, 1985 use only to for ; dence been he Describe your training, where it took place and its duration, and give the name(s) of your chief teacher(s) or director(s). 19. N/A. 20. I certify that to the best of my knowledge the statements in this application are true. Date Signature Return to: Arts Awards Service, The Canada Council, 99 Metcalfe Street, P.O. Box 1047, Ottawa, Ontario, K1P 5V8

2 Name of applicant 14a. Give the name, position and address of the three experts whom you have asked to give us an appraisal of your work and proposed program: Name Address Address Name Name Address Position 14b. If you are a visual arts or photography applicant, please indicate if your appraisers will be sending a letter to the Council. no ves 15. Indicate the kind and quantity of supporting material you are sending at your own risk. with the application . under separate cover □ slides (20) music scores recent reviews (max. 6) other (please describe) photographs tape recordings □ films manuscripts □ videotapes printed matter 16. Program of work Describe your program of work, bearing in mind that applicants will be assessed on their artistic background and potential, the contribution they have made to the art form and the merit of their program of work, including its artistic quality and relevance to their work. (If needed, please attach an additional sheet.) whence - See enclosed draft with comme Do you plan to work on your own, or at an institution? In the latter case, state name of institution and/or name of teacher 17. Do you expect to receive paid leave of absence or a sabbatical salary during the period of tenure? no uyes Are you applying for funding for this project from other sources, such as private sponsors, foundations, other grant-giving bodies or your employer? no dyes If so, state the amount and give particulars. (The Council should be informed of any changes.) \$ 4000 Tompation