EMAILS WILL BE ACCEPTED

Steve Bernard, bernard11070@gmail.com Cindy Koniushesky, cyn8165@gmail.com

Application for Membership

(If more space is needed for any response, please feel free to add a sheet of paper)

Student Name				
Address, City, State, Zip				
Home Phone	Cell Phone	E-mail		Date
				_
Why a	do you want to be a Ko	ey Member of W	'esleyan P	Potters?
n	Cr.			
Please tell us about y	our craft			
What department are you	applying for?			
Pottery	Jewelry		Weaving	
	i	6-2		_
At what level would you ca			n	fo i l
Beginner	Intermediate	Experienced	1 P	rofessional

- On average, how many pieces do you produce in a year?
- Classes and workshops completed in two of the last five years: (please list session/class and teacher name, Pottery, Wednesday am Gary O'Neil, Fall 2006, Spring 2007, Summer 2007; Mikhaill Zakin workshop, Spring 2007) If you are not sure of your completed classes, you can ask the office for help.

Please list all of your volunteer a members or teachers that can contain the second seco	activities at the Pottery during the past to onfirm these.	two years. If possible, list			
Do you think the student rules are too confining? Please explain.					
• When would you be available to give time to the Pottery? Please answer in terms of days/nights, weekdays/weekends, and times of the year you are or are not available.					
Based on your experience and skills	s, what 3 committees do you think you v	vould contribute the most to?			
Budget	Building and Grounds	Computer			
Education	Finance and Oversight	Fundraising			
Gallery/Shop	Glaze	Hospitality			
Glaze Kiln Loading	Long Range Planning	Nominating			
Office	Photo, Graphics & Brochure	Policy and Procedure			
Publicity	Safety	Sale			
Scholarship	Space and Design				

Please add any job experience, special skills or interest you might have.

Additional sheets of paper with information may be added.