



2020 APPLICATION

Student's Name: _____

Parent/Guardian Name: _____
(if under 18)

Email: _____

Phone: _____

Student Grade (Please circle one) K 1 2 3 4 5 6 7 8 9 10 11 12

School: _____

Title of Artwork:

Category (Select any that apply): Painting ___ Drawing ___ Performance (Music, Dance, Theater, etc.) ___ Photography ___ Videography ___ Sculpture ___ Hybrid___

If submitting a piece of performance art, please copy and paste the video URL below:

If your submission is **not** a piece of performance art, please email **at least two (2) photos** to education@wlv.org. Please include the subject line, *Artist of the Month*. At least **one (1) photo** must include the student with his or her artwork.

Mail application and photos to:

PBS39, Attn: Artist of the Month, 839 Sesame St., Bethlehem, PA 18015

OR

Email to education@wlv.org with the subject line, "Artist of the Month."