

**CITY OF AUSTIN  
ART IN PUBLIC PLACES  
SELECTION PANELIST NOMINATION FORM**

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DAY TELEPHONE (\_\_\_\_) \_\_\_\_\_ EVE TELEPHONE (\_\_\_\_) \_\_\_\_\_

EMAIL \_\_\_\_\_

YEAR RESIDENCY BEGAN IN AUSTIN (*if applicable*) \_\_\_\_\_

HIGHEST LEVEL OF EDUCATION \_\_\_\_\_

PROFESSION: \_\_\_\_\_ Artist  2D  3D \_\_\_\_\_ Arts Educator \_\_\_\_\_ Art Critic  
(*please check*) \_\_\_\_\_ Arts Administrator \_\_\_\_\_ Arts Dealer \_\_\_\_\_ Designer  
\_\_\_\_\_ Landscape Architect \_\_\_\_\_ Curator \_\_\_\_\_ Urban Planner  
\_\_\_\_\_ Fine Art Collector \_\_\_\_\_ Architect \_\_\_\_\_ Art Historian  
\_\_\_\_\_ Other (*please explain*) \_\_\_\_\_

EMPLOYER / ADDRESS \_\_\_\_\_

PUBLIC ART EXPERIENCE (*if any*) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

GENDER  Male  Female ETHNICITY (*optional*) \_\_\_\_\_

**AFFILIATIONS:** Please indicate your current affiliations with any Austin arts organization(s) or community organization(s), and your role, such as Board of Directors, Advisory Board, Staff, Member, or Volunteer. \_\_\_\_\_  
\_\_\_\_\_

Travel expenses will be compensated as needed. Please indicate if you are willing to waive an honorarium payment for services rendered during a selection process.  YES  NO

Return **NOMINATION FORM** along with a **CURRENT RESUME** to one of the following addresses:

**Mailing Address**  
Meghan Wells, AIPP Administrator  
PO Box 1088  
Austin, TX 78767

-or-

**Hand Delivery Address**  
Attn: Art in Public Places  
201 East 2<sup>nd</sup> Street  
Austin, TX 78701

Questions? Please e-mail [aipp@austintexas.gov](mailto:aipp@austintexas.gov) or call 512-974-9314.