

**IMPORTANT! \*Please use the Adobe Reader.**  
**For Mac users, please DO NOT use the software "Preview".**

## Curator Residency Program 2025 Application Form ①

### Personal Information

#### 1) Name

First Name:	Family Name:
Curator Name:	

#### 2) Nationality and Date of Birth

Nationality: <small>nationality</small>	Activity base: <small>city</small> / <small>country</small>
Date of birth: <small>day</small> / <small>month</small> / <small>year</small>	Age:
Gender:    Male                  Female                  Other (                  )	

#### 3) Contact Address

Address:	TEL:
	E-mail:
	Nearest International Airport:
Website:	

#### 4) Professional Affiliation

Name of your institution    *Unnecessary if independent
Title/Position

\*Policy of personal information usage

TOKAS uses your personal information solely for contacting you on this program. TOKAS never uses or shares your personal information provided to us in ways unrelated to the one described above.