

New England Traditions 2010

PROJECT DATA SHEET

(Please complete one sheet for each project submitted.)

Teacher Name _____

Project Title _____

(Please limit to 20 characters and spaces)

Class Length: _____ 2 hrs. _____ 4 hrs. _____ 6 hrs.

Intensive Study: _____ 8 hrs. _____ 12 hrs.

Level of Difficulty: Beginner Beg/Int. Intermediate Advanced

(Please be sure to check a level for all classes including Intensive Study)

IMPORTANT: If project is an Intensive Study, please explain why you consider it an intensive study class and provide a description of the class for our catalog. (Attach sheet if necessary)

Project Description in three words or less: (door crown, etc.) _____

Medium: _____ (Please list acrylic gouache as "Gouache.")

Type of Surface and Dimensions: _____

Cost of Project to Student: _____ (We will add RI sales tax and round off)

Specific supplies and special brushes needed by student: (only items beyond the basic supplies; limit to 50 spaces) _____

Is this pattern your own or do you own the copyright? _____ Yes _____ No

If no, attach permission slip from the author or copyright holder as required by contract.

Is this project available in a previously published pattern packet or book? _____ Yes _____ No
When? _____

_____ Project Number (Please number each project that you submit as 1, 2, 3 or 4.)

Enter the corresponding number on the photo label and attach to the color photo.