State of Kansas Capitol Preservation Committee

Request for Approval of Commissioned or Donated Exhibit or Artwork for Permanent Display

NOTE: Submit the completed Request fo Preservation Committee, Attn: Executive KS 66615-1099.	Director, c/o Kansas			
DATE:				
APPLICANT INFORMATION				
Name of Person Making Request:				
Address:				
Organization:				
Street or P.O. Box:				
City:	State:		Zip Code:	
Telephone: ()	Ext	Fax: ()		Ext
Email:				
SPONSOR INFORMATION				
Name:				·
Street or P.O. Box:				·
City:	State:	<u>.</u>	Zip Code:	
Telephone: ()	Ext	Fax: ()		Ext
Email:		· **		
TYPE OF REQUEST:				
 Commissioned Artwork Donated Artwork Permanent Exhibition Other (Please Specify) 				

Submission of a proposal does not guarantee approval or acceptance of the project. If a proposal is approved, all parties must comply with the complete guidelines of the Capitol Preservation Committee.

Please allow ample time for your request to make its way through the review process, as the period from initial proposal to dedication of the artwork, if accepted, may be several months. Also, no commissioned or donated artwork will be accepted without a prior, written agreement transferring ownership of the work to the State of Kansas.

Acceptance of your request may also require the approval of the Secretary of Administration, the Legislative Coordinating Council or both. Any permanent displays or monument proposed to be located on the State Capitol grounds must be authorized by the passage of a bill of the Legislature.

The Committee meets at least once, but no more than four times, per year.

Proposals should be submitted to:

Chairperson, Capitol Preservation Committee

Attn: Executive Director

c/o Kansas State Historical Society

6425 SW 6th Avenue

Topeka, KS 66615-1099

COMMISSIONED ARTWORK PROPOSAL

All proposals must include the proposed artist's résumé and contact information, copy of the proposed contract with the artist, a proposed project budget and artist plans before it will be considered. If additional space is needed, the general concept of the project, including the plans, project timeline and budget, can be presented on additional sheets, limited to two pages.

All commissioned artwork for exhibit in the Capitol must meet requirements contained within a written contract developed by the Secretary of Administration or Legislative Administrative Services or both.

SPONSOR INFORMATION						
Name:						
Street or P.O. Box:						
City:		State:			Zip Code:	
Telephone: ()	Ext.		Fax: ()		Ext
Email:						
ARTIST INFORMATION						
Name:						
Street or P.O. Box:			•			
City:		State:			Zip Code:	
Telephone: ()	Ext.		Fax: ()		Ext.
Email:						
General concept of art project:						
Timeline for completion and installation:						
Budget:						

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<u> </u>		·	
ist plans or maquette included (required):	□ Yes		
by of proposed contract with artist:	□ Yes	□ No	
nership granted to State of Kansas:	□ Yes	□ No	
pyright agreement:	☐ Yes	□ No	
litional comments:			

DONATED ARTWORK PROPOSAL

All works considered for acquisition by donation to the State of Kansas for exhibit in the Capitol must meet requirements contained within a written contract developed by the Secretary of Administration or Legislative Administrative Services or both.

All proposals must include the proposed artist's résumé and contact information, digital images of the artwork, a letter of intent by the donor as a gift to the State of Kansas and copies of all documentation relating to the acquisition of the artwork, its condition, value and exhibition history, are required before it can be considered.

Name:				_
Street or P.O. Box:				
City:	State:		Zip Code:	•
Telephone: ()	Ext	Fax: ()		Ext
Email:				
SPONSOR INFORMATION (if app Name:	•			
Street or P.O. Box:				· · · · · ·
City:	State:		Zip Code:	
Telephone: ()	Ext	Fax: ()		Ext
Email:			-	·
ARTIST INFORMATION Name:				
Street or P.O. Box:				
City:	State:		Zip Code:	
Telephone: ()	Ext	Fax: ()		Ext
Email:				
History of acquisition or purchase	e of the artwork (please in	clude copies of invo	ces and/or pro	oof of acquisition):

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2.			
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3			
ital images of artwork submitted (300dpi):	□ Yes	□ No	
nership granted to State of Kansas:	□ Yes	□ No	
pyright agreement:	□ Yes	□ No	
urance Value:	Date Set:		
			·
ditional comments:			

PERMANENT EXHIBITION PROPOSAL

Any foundation, group, or individual may submit a proposal to the Capitol Preservation Committee for review and approval for the permanent exhibition in the public areas of the Capitol.

OWNER INFORMATION				
Name:				
Street or P.O. Box:				
City:	State:		_ Zip Code:	
Telephone: ()	Ext	Fax: ())	Ext
Email:				
CREATOR INFORMATION				
Name:				
Street or P.O. Box:				
City:	State:		_ Zip Code:	
Telephone: ()	Ext	Fax: ())	Ext
Email:				
Please identify placement of the exhib	oition in the Capit	ol (up to three selec	tions in order of ch	noice):
1.				
2				
3				
Digital images submitted (300dpi):	□ Yes	□ No		
Insurance Value:	Date	e Set:		

DO NOT WRITE BELOW THIS LINE - FOR COMMITTEE USE ONLY

Date Received:			**************************************			
Additional information requested on						
Additional information provided on		, 20				
Presented to the Committee on		, 20				
Committee action taken on		_, 20, to:	:			
☐ Approve	□ Deny		□ Defer			
Notify requesting party of the following	•			TOTAL CO. I	*	- 1000
Other Instructions:						