

2008-2010 DULUTH POET LAUREATE PROGRAM

APPLICATION FORM

Date: _____

Name of Applicant: _____

Street Address: _____

City: _____

Zip Code: _____

Home telephone: _____

E-mail address: _____

Business phone: _____

Signature of Applying Poet: _____

Your signature confirms to the Duluth Poet Laureate Selection Committee that you are a resident of Minnesota, and that you have lived and/or worked in Duluth or in the Duluth area for at least five of the last ten years.

Members of the Duluth Poet Laureate Selection Committee, current board members of Lake Superior Writers, or their family members are not eligible to apply. Please submit this form, along with other required materials, to:

Duluth Poet Laureate Program

c/o Lake Superior Writers

1301 Rice Lake Road, Suite 132

Duluth, Minnesota 55811