 ARTS EDUCATION APPLICATION

 COVER PAGE

**Applicant Data**

Name of School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_ NC\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County Cabarrus

Contact Information: phone (w)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (cell)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_website\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Ongoing Arts Program Information**

Please give a brief description of your school’s current arts programs and services, how many contact hours students have in arts classes, and number of special arts presentations each year.

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 SUMMARY PAGE

School Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Grant Request** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Must be matched 1:1)

Previous Grant Amount Received $\_\_\_\_\_\_\_\_\_\_\_\_ School year \_\_\_\_\_\_\_\_\_

Program Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Program End Date \_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Description**

Please include the purpose, artist(s) used, and how it will reach the public outside of the school.

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 BUDGET SUMMARY PAGE

School Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Budget Summary of Proposed Project**

*This page is only a budget summary. You must also provide an itemized budget as an attachment.*

**Project Expenses** Cash = Grant Amount + Applicant

Expenses Requested Cash Match

**A Personnel**

 Administrative staff \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 Artistic staff \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 Technical/Production staff \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

**B Outside Fees and Services**

 Artistic contracts \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 Other contracts \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

**C Space Rental** \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

**D Travel**  \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

**E Marketing**  \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

**F Remaining Project Expenses** \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

**G Total Cash Expenses**  \_\_\_\_\_\_\_\_\_\_\_\_ = \_\_\_\_\_\_\_\_\_\_\_\_ + \_\_\_\_\_\_\_\_\_\_\_\_

**Project Income** Cash Income

**A Admissions** \_\_\_\_\_\_\_\_\_\_\_\_

**B Contracted Services Revenue** \_\_\_\_\_\_\_\_\_\_\_\_

**C Other Revenue** \_\_\_\_\_\_\_\_\_\_\_\_

**D Private Support**

 Corporate support \_\_\_\_\_\_\_\_\_\_\_\_

 Foundation support \_\_\_\_\_\_\_\_\_\_\_\_

 Other private support \_\_\_\_\_\_\_\_\_\_\_\_

**E Government Support**

 Federal \_\_\_\_\_\_\_\_\_\_\_\_

 State/regional (not including this request) \_\_\_\_\_\_\_\_\_\_\_\_

 Local \_\_\_\_\_\_\_\_\_\_\_\_

**F Applicant Cash** \_\_\_\_\_\_\_\_\_\_\_\_

**G Grant Amount Requested** \_\_\_\_\_\_\_\_\_\_\_\_

in this application

**H Total Cash Income** \_\_\_\_\_\_\_\_\_\_\_\_

 (must at least equal Total Cash Expenses,

 Item G above)

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 ATTACHMENT PAGE

**Applicant Attachments**

Please use this checklist to make sure you have completed your application properly. Collate your ten packets with paper clips on three-hole punch paper in the order below:

\_\_\_\_Completed Application Cover Page

\_\_\_\_Completed Application Summary Page

\_\_\_\_Completed Budget Summary Page

\_\_\_\_Artist names and websites

\_\_\_\_Letters of support from collaborating schools, if applicable

**Certification**

We certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of our knowledge.

Name of Principal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Position of Project Coordinator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_