

Community Arts Grants 2009
Chautauqua County Decentralization Grants

Administered by the Cattaraugus County Arts Council
Funded by the New York State Council on the Arts

Application

This application is limited to non-profit organizations with a legal address in Chautauqua County.
Consult the guidelines to determine if your organization is eligible to apply.

Deadline: Wednesday, November 5, 2008, 5:00 pm.

Applications must be submitted to the Cattaraugus County Arts Council.

Legal name of organization: _____

Legal mailing address: _____

City: _____

State: New York Zip: _____ County: Chautauqua

Contact & title: _____

Phone: _____ Fax: _____

Email: _____

Website: _____

Please provide a brief summary of this project:

Project discipline: Please check one that applies to your project:

- Dance Music Opera Theater Visual art Design art
 Photography Media Literature Folk arts Multi-disciplinary

Fiscal year start and end months: _____

Year organization formed/incorporated: _____

NYS Assembly District #: _____

NYS Assemblyperson: _____

NYS Senate District #: _____

NYS Senator: _____

US Congressional District #: _____

US Congressperson: _____

*Check out this website to find your elected representatives: <http://nymap.elections.state.ny.us/nysboe>

Have you ever applied directly to the New York State Council of the Arts for funding?

No Yes If yes, what year? _____

Proof of nonprofit status: Please check one that applies and submit it with this application as proof of nonprofit status.

- Determination letter from the IRS as a 501 (c)(3) organization
 Letter from the NYS Board of Regents Charter, Section 216 of the Education Law
 Filing receipt for the Registration of Charitable Organizations Section 172 of the Executive Law
 Letter of Acceptance of Incorporation under Section 402 of the Not-for-Profit Law
 Official authorization as an arm of a local government

Project Information

Project title: _____

Project venue: _____

Start/end date(s): _____

Target audience: _____

Total people served: _____ Adults: _____ Youth: _____

Total estimated expenses*: _____ Amount being requested*: _____

*The total expenses and amount being request are the same figures you have calculated on the budget form.

Narrative

Using up to two 8 ½" x 11" single-sided sheets of paper, give a complete description of the project for which Community Arts Grants funding is being requested. Please do not use a font smaller than 10 pt. Attach the narrative to the application. You may arrange your narrative in any format that you choose but all of the required information must be included.

Your proposal will be evaluated primarily on the basis of this narrative. The following information MUST be included:

- A) **Summary** statement. This is a one sentence statement that clearly states how much funding is being requested and for what specific purpose.
- B) Complete, but concise **project description** including information about the artistic personnel as well as the organizational administrative personnel.
- C) Clearly define the **goals and objectives** of this project and how they will be achieved.
- D) Clearly describe the **community interest and community benefit** of this project.
- E) Describe the **marketing and publicity plan** that will be designed for this project.
- F) Describe the **logistics** of the project such as the venue, site capacity, and accessibility.
- G) Clearly describe how you will **evaluate and assess** this project at its completion to determine the degree to which the goals and objectives were achieved.
- H) State what **adjustments** you will have to make to this project if partial funding is awarded.
- I) Provide a brief **history** of your organization.

Tips: CCAC staff will gladly review and critique a draft of your narrative up to one week prior to the deadline date. When preparing to describe your project, please refer to the "Criteria for Evaluating Applications" and "Award Priorities" in the guidelines to make sure your project reflects these necessary standards. Narrative writing will be discussed at the application workshops. Additional assistance will be provided by the Community Arts Grant Coordinator as requested.

Major artists and performers

If relevant to your project, please list the major artists and/or performers who will be involved. Optional: you may attach resumes of artists or brochures of presenting organizations that directly relate to this project. You may copy this form if you need additional space for this listing.

Name: _____

Address: _____

Phone/email: _____

Website: _____

Name: _____

Address: _____

Phone/email: _____

Website: _____

Checklist, Contacts, & Certification

Checklist

Please be sure to include all of the following in your application packet. You will need to submit 11 complete sets of material.

- Eleven complete sets of the application and all materials. Please collate in the following order, listed in 1, 2, 3 order: application form (3 pages), project budget form, project narrative, and optional attachments. Each set may be stapled.
- Optional attachments include such materials as artistic resumes, brochures, fliers. If submitting video tapes, photographs, or audio tapes, please send specific instructions on what portion you would like the panel to review and be sure to include eleven copies as well. Please be very selective about the optional submission materials and submit only items that directly relate to the proposed project.
- One copy of proof of non-profit status
- One copy of the most recently completed financial statement
- You have checked and re-checked your math on the budget sheet. Mistakes will jeopardize or weaken your chances of being funded.

Contact People

Please list two contact people for this project who are knowledgeable about all aspects of the event and this grant application.

Name: _____
Address: _____
City, State, Zip: _____
Phone day/night: _____
Email: _____

Name: _____
Address: _____
City, State, Zip: _____
Phone day/night: _____
Email: _____

Certification and Release

The undersigned certifies that he or she:

- is a principal officer of the applicant organization with authority to obligate it;
- has knowledge of the information presented herein;
- has read the guidelines of the Community Arts Grants funding program and that this applicant complies with and is made subject to said guidelines;
- on behalf of the application organization releases the Cattaraugus County Arts Council, and their agents, with respect to damages to property or material submitted in connection herewith.

Signature: _____ Date: _____

Printed name: _____

Title: _____

Submission details

- All 11 sets of the application materials must be remitted to the Cattaraugus County Arts Council by 5 pm on Wednesday, November 5, 2008. This is NOT a postmark date/time.
- Applications may be mailed to: CCAC, POB 406, Olean, NY 14760.
- Applications may be hand-delivered to CCAC's office at 80 North Fourth Street, Allegany, NY 14706, first floor. Do not mail to this address.
- Need help? Contact Kimberly LaMendola Driscoll, Programs & Grants Manager at kim.ccac@verizon.net or 716-372-7455.