

COVER PAGE

ECAC ARTS SMALL GRANT APPLICATION FY 2009

APPLICANT ORGANIZATION:

Address:

Mailing Address (if different):

City, State, Zip:

County:

Project Director:

Title:

E-mail address:

Website URL:

Phone (day):

(other):

(fax):

U.S. Congressional District: 8th

MN House District:

Tax Exempt Number:

(does not apply if the applicant organization is using a fiscal agent or is a local unit of government or Independent School District)

Note: Unless a local unit of government or Independent School District you **must** attach a copy of either your organization's or your fiscal agent's **IRS** Letter of Determination of tax-exempt status. If your group is not using a fiscal agent, the following section will be blank:

FISCAL AGENT:

Address:

City, State, Zip:

Contact Person:

Phone (day):

(other):

(fax):

Fiscal Agent Tax Exempt Number:

BRIEF PROJECT DESCRIPTION: describe your project in 50 words or less.

PROJECT TITLE:

Project Start Date:

m/d/y

Amount of Request: \$

Project End Date:

m/d/y

Total Project Cost: \$

Total Arts Budget for the Previous Fiscal Year: \$

PROPOSED PROJECT DESCRIPTION

ECAC ARTS SMALL GRANT APPLICATION

DETAILED PROJECT DESCRIPTION & PROJECT NEED: Describe the project for which you are requesting funds. Include activities involved in completing the project, dates, number of performances, names of artists or companies, and any other information that will help the Arts Council understand your project. Describe the community need for this project. . Explain here how you will advertise for the project. Also, you must explain what exactly the requested ECAC grant monies will provide.

note: you may use one additional page for the Project Description per the instructions

PROJECT BUDGET/EXPENSES

ECAC ARTS SMALL GRANT APPLICATION

| <i>Estimated Expenses</i> | <i>Amount</i> | <i>Explanatory Notes</i> |
|---|---------------|--------------------------|
| <hr/> | | |
| 1. Personnel (Include title and rate of pay or equivalent.) | | |
| a. Employee salaries & wages | | |
| b. Artist(s) fees | | |
| c. Artist(s) travel and expenditures | | |
| 2. Publicity Expenses | | |
| 3. Rental Fees | | |
| 4. Expendable Supplies and Materials | | |
| 5. Printing and Postage | | |
| 6. Other expenses | | |
| 7. TOTAL EXPENSES | | \$ _____ |

PROJECT BUDGET/INCOME

ECAC ARTS SMALL GRANT APPLICATION

| <i>Estimated Income</i> | <i>Amount</i> | <i>Explanatory Notes</i> |
|---|---------------|--------------------------|
| <hr/> | | |
| 1. Earned income | | |
| Subtotal earned income | \$ | |
| 2. Grants and contributions | | |
| <small>(Not this grant place ECAC request on line 5. Indicate whether funds are secured or not .)</small> | | |
| a. Individual contributions | | |
| b. Foundations and corporations | | |
| c. Government | | |
| d. Other (explain) | | |
| Subtotal grants and contributions | \$ | |
| 3. Other- including cash or in-kind | | |
| Subtotal other | \$ | |
| 4. Add subtotals 1, 2 & 3- total income (match) for the project | \$ | |
| 5. ECAC request-may not exceed 50% of the total project cost | \$ | |
| 6. Total income (add lines 4 & 5) | | \$ _____ |
| <small>This must be equal to Line 7 from Expenses on previous page.</small> | | |

Note- Eligible applicants have at least a 10% cash (i.e. not in-kind) match for the project. In-kind income should be significant items such as donated materials, labor, or space that can be given a dollar value. Documentation for in-kind must be available.

CERTIFICATION

ECAC ARTS SMALL GRANT APPLICATION

CERTIFICATION SIGNATURES

We, the undersigned, certify that our board of directors supports the project as described in this application and that all the information in the attached application is true and correct to the best of our knowledge. Further, we resolve to carry out the project as it is described in the attached application and to abide by program guidelines if funding is awarded by ECAC.

print name of board officer/fiscal agent

print name of project director

board officer/fiscal agent signature

project director signature

board officer/fiscal agent title

Project Director
title

date signed

date signed

note: Two separate signatures are required. One signer must be a board officer and the other signor is the project director. If you have a fiscal agent one signature must be an authorized representative of the fiscal agent and the other signature is for the project director.

PROJECT APPLICATION CHECKLIST

ECAC ARTS SMALL GRANT APPLICATION

Check the boxes below as each item in your application is completed and ensure that you have numbered the grant application pages as noted below. Boxes left blank will flag your application as potentially incomplete and therefore ineligible. If you do not see boxes below, the rtf file may not be compatible with your computer. Reference the ECAC pdf version, or a hard copy, to ensure that your application is in the correct format.

THIS CHECKLIST IS A REQUIRED PART OF THE APPLICATION.

I. COMPLETENESS

- A. Submit ONE one-sided copy of the following required materials, collated in the following order (paper clips only -- no staples):
- Cover page- page 1 (Use form provided or generate identical form by computer.)
 - Narrative- pages 2 (Use form provided or generate identical form by computer.)
 - Board of Directors Information (to be provided by applicant.) page 2a
 - Résumé's of artists, project director, and key project personnel (from applicant.)page 2b - ?
 - Project Budget- pages 3 & 4 (Use form provided or generate identical form.)
 - Copy of letter from the IRS documenting your group's tax-exempt status unless a local unit of government **OR** letter of agreement with fiscal agent AND a copy of fiscal agent's tax-exempt letter. Page 4a - ?
 - Certification Form, signed and dated- p. 5 (Submit original copy.)
 - Application Checklist- p.6 (Submit original copy.)
 - RAC Data Collection Form (Submit original copy.)

II. ELIGIBILITY

- A. Our group/organization:
- Has no overdue final reports with ECAC.
 - Is incorporated as a nonprofit or has an official fiscal agreement with a nonprofit and, unless a local unit of government, a copy of the IRS Letter of Determination of tax-exempt status.
 - Is located in and serves the East Central Minnesota Region (the Counties of Chisago, Kanabec, Isanti, Mille Lacs, or Pine)
- B. This grant will NOT be used for:
- ◆ Activities of a for-profit organization or project.
 - ◆ Projects where funds are requested to account for deficits in projects or programs begun prior to the project start date.
 - ◆ Organizations with a past due report to ECAC.
 - ◆ Applications where funds are to be used to match other ECAC grant applications.
 - ◆ Requests for construction or capital improvements, purchase of real property or endowment funds.
 - ◆ Projects in which total state funding is more than 50% of the project costs.
 - ◆ Fundraising events.
 - ◆ Activities which are not open to the public.
 - ◆ In-school projects by students or projects carried out exclusively by/for student organizations.
 - ◆ Programs by schools that are limited in access to the public or serve only schools or staff.
 - ◆ Projects which are for the religious socialization of the participants.
 - ◆ Activities that engage in political lobbying.
 - ◆ Projects where artists are required to pay entry or exhibition fees in order to exhibit or perform in the project for which funds are sought.