



ATLANTIC COUNTY /NJSCA 2018 LOCAL ARTS GRANT

Application PAGE ONE: CHECKLIST TO HELP ASSEMBLE PROPOSAL:

New this year: each organization is required to submit ONE original typed application signed in blue ink. Five examples of support materials (can include brochures, poster, news clippings etc.) may be included with the original application or may be submitted on CD, DVD or flash drive.

No part of the application will be accepted electronically.

Application should be submitted in a pocket folder - do not place application in a binder.

Section 1: RIGHT POCKET

- Grant Application Forms (pages 2 through 4) in numerical order
- Narrative (no more than 4 pages with at least 12 point type)
- Resumes of Key Staff
- Biographies/Resumes of Professional Artists that are a part of your project
- List of Board Members and list their various affiliations
- This checklist

Section 2: LEFT POCKET:

- Support materials – five examples – may be submitted on CD or flash drive (if the organization has been previously funded a minimum one or more of the support materials should contain the required funding credit line)
- ADA checklist (form found on the website www.aclink.org/culturalaffairs)
- Publicity and Credit Line Agreement

IF ORGANIZATION IS NEW TO THE GRANT PROGRAM OR HAS NOT APPLIED IN THE LAST 3 YEARS:

- IRS letter of determination of 501c3 tax exempt status

IF ORGANIZATION IS SEEKING TO APPLY FOR GENERAL OPERATING SUPPORT FUNDING:

- Long Range Plan
- ADA Plan

- Please review your application before submitting it and make sure it contains all the requested materials and gives complete information and the full picture of your organization and the project for which you are requesting funds.
- All applications are reviewed by Office of Cultural and Heritage Affairs staff before forwarding to the grant review panel. This review is only to check for all the required materials and documents.
- Incomplete applications, those lacking any of the required materials as stated in the checklist above, will not be forwarded to the review panel.

DEADLINE FOR SUBMITTING THE GRANT:

WEDNESDAY, SEPTEMBER 6, 2017 at 4:00 pm.

FREE GRANT PROPOSAL WRITING WORKSHOPS:

July 12 (Narrative) and July 19 (Budget), 7:00 pm, Canale Training Center,
5033 English Creek Avenue, Egg Harbor Township NJ.

Registration is required through email at: culturalaffairs@aclsys.org

THESE WORKSHOPS ARE MANDATORY FOR ORGANIZATIONS NEW TO THE GRANT PROGRAM.

GENERAL INFORMATION ABOUT THE APPLICANT:

Organization Name: _____ NJ Charities Reg. # _____

Address: _____

City, State, Zip: _____ Federal ID #: _____

Primary Contact Person: _____ Phone #: _____

Email of Primary Contact Person: _____

Organization Website: _____ Congressional District: _____ NJ Legislative District: _____

THE PROPOSED PROJECT INVOLVES: CIRCLE OR UNDERLINE ANY THAT APPLY

- | | | | | |
|-------------------|------------------------|-----------------------|-------------|-----------------|
| Choral Music | Instrumental Music | Multi-Disciplinary | Visual Arts | Crafts |
| Interdisciplinary | Opera | Classical Music | Jazz Music | Musical Theatre |
| Dance | Literature | Photography | Design Arts | Media Arts |
| Theatre | Performance | Classes/workshops | Exhibitions | Music |
| Performance | Commission of new work | other (explain) _____ | | |

TYPE OF GRANT: CIRCLE OR UNDERLINE ONE (See page 2 of guidelines)

- | | | | |
|------------------------------|----------------------|----------------------------|-----------------------|
| Gen. Operating Support (GOS) | Special Project (SP) | Gen. Program Support (GPS) | Tech. Assistance (TA) |
|------------------------------|----------------------|----------------------------|-----------------------|

Total Amount Requested in this Proposal: \$ _____ (page 6...A.)

2018 projected INCOME _____ (page 6...C.) 2018 Projected EXPENSES _____ (page 5...B.)

CERTIFICATION: (2 different signatures are required) (sign in blue ink after printing the page)

I certify to the best of my knowledge and belief, the information in this application is true and accurate. I further understand that submission of this application implies prior review and representations therein by my organization's board or appropriate governing body. I also understand and agree that submission to Atlantic County Office of Cultural & Heritage Affairs signifies intention of compliance with title VI of the Civil Rights Act of 1964, and Title IX of the Education Amendments 1972 and the Americans with Disabilities Act (ADA).

Name & Title - (President/Chair of Organizational Board) Date Signature

Name & Title - (Project Coordinator or Contact Person) Date Signature

INSTRUCTIONS FOR CREATING THE NARRATIVE: *Answer all questions on a separate paper. Please include the both the question numbers and letters e.g. 2. a., 3. b. etc. Make sure the name of the applicant organization appears as the heading of each page. Type should be no smaller than 11 point.*

1. **PURPOSE OF FUNDING STATEMENT:** For publication purposes, state in 50 words or less what this funding will help to support. The statement should illustrate both what will be made possible through the grant and its public benefit. GOS and GPS applicants should encompass the entire operation or program. Special Project applicants should describe the entire project. It will be used in press releases and other public inquiries. Begin with "This grant will help support..."
2. **TALK ABOUT YOUR ORGANIZATION:**
 - a. Begin with the organization's official mission statement which can be found within the by-laws. *Non-arts organizations should also describe structure and activities relevant to the arts project and indicate the relationship of the arts to their organization's mission.*
 - b. Describe how, when and why the organization was formed and by whom.
 - c. Describe who and how many are involved in the management of the organization. Remember to include resumes of the primary people involved in managing or coordinating the project.
 - d. Based on the last two years of programming, describe the participants in the organizations programs (both types: "the artist/presenter/performer/teacher" and "the audience/student/viewer/listener") How do collect information about your participants?
3. **COMPONENTS OF THE PROJECT FOR WHICH THIS FUNDING IS SOUGHT:** *(GOS should give outline of general program for the year for which the organization is seeking operating support.)*
 - a. What is the timeline? Where will it take place?
 - b. Who will manage the project and what are their qualifications or experience?
 - c. Detail the relevant qualifications of the key artists involved. *(Remember to include resumes or bios of key artists.)*
 - d. What is the goal of the project or program? Describe the public benefit(s) of the program.
4. **DOES THIS FULFILL PRIORITIES SET BY NJSCA?** Refer to page 3 of the guidelines. Describe how the proposed project or program satisfies any of the priorities that the NJSCA has set forth for its funding programs.
5. **HOW WILL THE PUBLIC KNOW?** Describe what methods the organization now uses and/or plans to use to reach the organization's regular audience/participants and the public at large?
6. **AUDIENCE PARTICIPATION:** Refer to page 8 of the guidelines. What efforts has the organization taken to broaden, deepen and diversify participation in the arts and to reach culturally diverse communities? Describe methods planned to reach out to new audiences and/or special targeted audiences. Describe how the organization will attempt to break through the reasons or barriers that block full participation in the arts. (These reasons or barriers could be, among many things, physical, economic, geographic, cultural, language and transportation.)
7. **EDUCATION:** Describe the educational component of the organization's project. A key ingredient of audience development is education. It is expected that all funded projects and programs have an educational element. This element can run the gamut from hands-on classes to a more in-depth description in the program guide. Does this program/project advance arts education in school, after school or in life-long learning?
8. **SUCCESS:** How will the organization measure or evaluate that the proposed program or project is successful? Look back at what was answered in #3-d. How will the organization evaluate or calculate or gather data and information as proof that the program reached the goal(s) set for it? The applicant should have some idea of assessing that goals were or weren't accomplished.
9. **MATCHING FUNDS:** A grant award must be matched a minimum of 1 to 1. (See guidelines page 2.) Discuss how the organization will raise the funds that provide the match for this proposal. Address anything that could be an issue in the organizational audit or financial statement, particularly any surplus or deficit.
10. **BUDGET BREAKDOWN:** Give explanation or clarification of numbers listed in both budget sheets - #1 and #2
11. **OTHER:** There may be something very unique about the organization or other information or concerns about which the organization would like the grant review panel to be aware. Describe here.

Organization Name: _____

LOCAL ARTS FINANCE CHART # 1 EXPENSES

Please round to the nearest dollar. If funding has been received before, record in the first two columns the expenses from the FY 2015 Final report and the current FY 2016 project based on award amount. First time applicants need to fill out only the last column. (If the project or program has a financial history it is to the organization's benefit to show past expenses even if funding has not been received previously.)

	FY 2016 Actual (1/2016-12/2017)	FY 2017 Ongoing (1/2017-12/2017)	FY 2018 Projected (1/2018-12/2018)
PERSONNEL			
Administrative			
Artistic			
Technical/Production			
OUTSIDE FEES & SERVICES			
Artistic			
Other			
OTHER OPERATING EXPENSES			
Space Rental/ mortgage payments			
Marketing (advertising, public relations, etc.)			
Travel & Transportation			
Phone & Postage			
Facility Maintenance			
Rentals			
Supplies & Materials			
Insurance			
Technical Production (non-personnel)			
Other (itemize if over 5% of total)			
TOTAL CASH EXPENSES			B.
TOTAL CASH INCOME (from Chart #2)			
Total Annual (Deficit)/Surplus (Income minus expenses)			

Organization Name: _____

FINANCE CHART #2 - INCOME

Please round to the nearest dollar. Applicants who have received prior funding record in the first two columns the income from the FY 2016 Final report and the FY 2017 ongoing project. Groups applying for the first time need to fill out only the last column. However if the project or program has a financial history it is to the applicant's benefit to show past income even if funding has not been received before. *Under Contributed Income/Private Sources & Government, list the two largest contributors, and then provide a total of all other contributors on the third line.*

EARNED INCOME	FY 2016 Actual (1/2016-12/2016)	FY 2017 Ongoing (1/2017-12/2017)	FY2018 Projected (1/2018-12/2018)
Admissions			
Contracted Service Revenue			
Other (include sales and all investment income to be spent)			
CONTRIBUTED INCOME/PRIVATE:			
Corporations			
1)			
2)			
All others			
Foundations			
1)			
2)			
All others			
Individuals & Other Private Sources			
CONTRIBUTED INCOME/GOVERNMENT: Other than this grant:			
1)			
2)			
All others			
APPLICANT CASH (include carry-forward surplus, parent institution cash**, and other unearned and non-contributed income)			
LOANS used to support the activities			
AWARDS & REQUEST – <i>awarded FY 16, awarded FY 17, amount requested FY 2018 (A)</i>			A.
TOTAL CASH INCOME – <i>actual for FY16, potential for FY17 and FY18</i>			C.

** Parent institution cash may include both any line item appropriation for the project and the pro-rated value attributable to the project cash appropriated to the salary and operating accounts of the unit sponsoring the project.