

# ARTS COUNCIL OF HILLSBOROUGH COUNTY COMMUNITY ARTS IMPACT GRANT (CAIG) APPLICATION

This is a **SAMPLE ONLY** of the type of information the online application will require. It is accurate at the time this document was created; however, some minor changes may have been made to accommodate the online system.

## A. ORGANIZATION INFORMATION

Please check the box that best describes your organization:

- 501(c)(3) Nonprofit organization with a principal office address in Hillsborough County**
- Department or Division of a 501(c)(3) College or University with a principal office address in Hillsborough County.**

**(If first box is checked link to following Nonprofit information)**

- A.1. Organization Name (legal name):
- A.2. EIN #:
- A.3. Principal Office Address (no P.O. Boxes, include city, state, zip):
- A.4. Mailing Address (if different):
- A.5. Phone:
- A.6. Website:
- A.7. Grant Contact:
- A.8. Title:
- ~~A.9.~~ Phone:
- A.10 Email:
- A.11. Grant Amount Requested (\$1,000 - \$5,000):

**(If second box is checked link to following Colleges and Universities information)**

- A.1. College or University Name (legal name):
- A.2. EIN #:
- A.3 Department/Division Name:
- A.4. Principal Office Address (no P.O. Boxes, include city, state, zip):

- A.5. Mailing Address (if different):
  - A.6. Phone:
  - A.7. Website:
  - A.8. Grant Contact:
  - A.9. Title:
  - A.10. Phone:
  - A.11. Email:
  - A.12. Grant Amount Requested (\$1,000 - \$12,500):
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## **B. PROJECT INFORMATION**

**(Same for all applicants)**

- B.1. Name of Project:
  - B.2. Total Cost of Project
  - B.3. Type of Project (i.e.: special event, education, public art, etc.):
  - B.4. Briefly explain the Focus or Purpose of this project (up to 500 words.):
  - B.5. Project Start Date:
  - B.6. Project End Date:
  - B.7. How long has the project been in existence:
  - B.8. Approximate number served by the project in the last fiscal year:
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## **C. ORGANIZATION PROFILE**

**(Same for all applicants)**

### **C.1. MISSION**

Insert Mission Statement

### **C.2. ORGANIZATION SNAPSHOT**

Provide the 30-second "elevator speech" that best describes your organization to someone who is not familiar with it, your organization's role in the community and why this person should care. *(Up to 500 total characters, about 100 words)*

**C.3. INTERNAL DEMOGRAPHICS, DIVERSITY**

Please indicate the number of individuals within your organization for each category. Creatives means artists, makers, musicians, photographers, entertainers, and any other creative industry professionals supporting your organization.

	Board	Staff	Volunteers	Creatives
Total Number				
Female				
Male				
Prefer Not To Say				
Asian/Asian American				
Black/African American				
Hispanic/Latino/Latina				
Native American/American Indian/Alaska Native/Native Hawaiian				
White (Non-Hispanic)				
Multi-racial or multi-ethnic (2+ races/ethnicities)				
Other				
Persons with disability				

**C.4. POPULATION SERVED AND DIVERSITY**

This is for your entire organization. Take the total attendance and estimate the number of individuals in each category. If you're unable to estimate a specific category, add your estimate to "adults" for everyone but children.

	Last Completed Fiscal Year	Current Fiscal Year
Total attendance*		
Paid admissions in Hillsborough County*		
Free admissions in Hillsborough County*		
Number of season ticket holders/memberships		
Children/Youth (0-18 years)		
Students (College/University)		
Adults		

Older Adults (65+ years)		
Please estimate the number of veterans served:		
Veterans		

SAMPLE

## **D. APPLICATION NARRATIVE**

**(Same for all applicants)**

### **D.1. Access & Community Engagement**

**D.1.a.** In what ways will the project create cultural equity and access by engaging a diverse range of voices and participants, including people with disabilities. (Up to 2000 total characters or 400 words)

**D.1.b.** Describe the planning process for the project. Provide evidence that a wide range of voices and perspectives were represented during the planning. (Up to 2000 total characters or 400 words)

**D.1.c.** How do you define the community that this project will serve? What are the demographics and needs of this community? Explain how this project provides greater access to arts and culture for this community? (up to 2000 total characters or 400 words)

**D.1.d.** Clearly describe the specific outcomes for the project and why you believe these are attainable. What attitudes, behaviors, and/or conditions will change as a result of this project? How will you measure the impact? (Up to 2000 total characters or 400 words)

**D.1.e.** What meaningful collaborations and partnerships have been formed during the development of this project that will continue throughout implementation. How will you measure the success of these partnerships?

### **D.2. Artistic & Cultural Vibrancy**

**D.2.a.** In what ways will the project create pathways for supporting underserved communities and diverse citizens of Hillsborough County by increasing access to existing or new cultural assets? (Up to 2000 total characters or 400 words)

**D.2.b.** How will the project provide quality arts and cultural experiences that are relevant for the targeted participants. (Up to 2000 total characters or 400 words)

**D.2.c.** Outline the goals and objectives for the project. Through what process were these established? (Up to 2000 total characters or 400 words)

**D.2.d.** Provide a detailed timeline for the implementation of the project. (Up to 2000 total characters or 400 words)

### D.3. Organizational Capacity

**D.3.a.** Outline the qualifications of the administrative and artistic staff for the project. Demonstrate how each person is qualified to implement the project and ensure its success. (Up to 2000 total characters or 400 words)

**D.3.b.** Will other funding sources be needed to complete this project? If so, what are the anticipated sources of funding? (Up to 2000 total characters or 400 words)

## E. ADDITIONAL NARRATIVE QUESTIONS

**(For College/University Applicants Only—Nonprofits may skip this section)**

1. How will the project be made accessible to those beyond your school community? (Examples: free and ample parking, satellite performances/exhibitions, live streaming, etc.)
2. How will you invite the citizens of Hillsborough County to participate in this project?

## F. OPERATING BUDGET SUMMARY

**(Same for all applicants)**

Complete tables below for your organization's total operating budget. Tables ask for expenditures and revenues for the last completed fiscal year and current fiscal year.

<b>EXPENDITURES</b>	<b>Last Completed Fiscal Year</b>	<b>Current Fiscal Year</b>
Personnel – Administrative (W2)		
Personnel – Artistic (W2)		
Personnel - Technical/Production (W2)		
Outside Professional Services-Artistic (1099)		
Outside Professional Services-Other (1099)		
. Rent- Venues		
Travel		
. Marketing		
. Remaining Operating Expenditures		
. Total		

<b>REVENUE</b>		
Admissions		
Contracted Services Revenue		
Other Revenue		
Corporate Support		
Foundation Support		
Membership Fees		
Other Private Support		
Government Support - Federal		
Government Support - State/Regional		
Government Support-City within Hillsborough*		
Government Support City outside of Hillsborough		
Applicant Cash		
Total		
Operating Fund Balance—beginning of year		
Operating Fund Balance—end of year		
Current Value of Endowment—(rounded)		

**\*Explain the specific source of this funding. Please include when you first received it and what it is used for:**

**G. PROJECT BUDGET**  
**(Same for all applicants)**

Organization name:

Name of Project:

Project Begin/End Dates:

Total Cost of Project:

**Expenses**

EXPENDITURE	DETAILS	TOTAL BUDGETED AMOUNT	GRANT REQUEST (HILLSBOROUGH COUNTY)
1.Outside Professional Services-Artistic			





## H. REQUIRED SUPPORT MATERIALS

Please provide the following information:

- Letters of Partnership
- Balance Sheet for Last Completed Fiscal Year
- Board of Directors List with Affiliations
- IRS Letter of Determination
- Form 990
- Project Timeline
- Support Documents

### CERTIFICATION AND COMPLIANCE STATEMENT

I hereby certify that I am authorized to submit this application and that the information contained in this application, all accompanying documents and support materials are true and correct to the best of my knowledge. I acknowledge that my electronic signature below shall have the same legal effect as my written signature.

**Signature:**

**Title:**