

2017 YOUTH ARTS EDUCATION for ARTS & CULTURAL ORGANIZATIONS GRANTS PROGRAM APPLICATION

Note: Your application may be opened and continued at later date by returning to the unique URL sent to you via email when you initially signed in to the application process.

To see the application in its entirety download the sample application here.

The application has been divided into several pages. <u>Each</u> page must be completed BEFORE you can move on to the next page. The Next button = Save!

Please download Proposal Budget & Detail and Certification and Compliance Form <u>prior to</u> beginning your application. (You may download them <u>here</u>.)

You may attach the required/requested documents as you go.

Remember to complete each page and press NEXT.

Grant Period: May 24 - December 1, 2017

For technical online application supprt email media@creativepinellas.org

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Organization Name

FEIN Number

Phone

Website

Year of Incorporation	
State of Incorporation	
Organization Mission Statement (Word Limit 125)	
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Organizational History (Word Limit 250)	
Contact Person (Name)	
Title	
Contact Email	
Name of Project/Program where funding will be applied	
Project Start Date	
Project End Date	

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Number of Children/Youth to be served:	
# of Children (Ages up to 5)	
# of Children (Ages 6-12)	
# of Youth (Ages 13-18)	
TOTAL Children & Youth participation	
Anticipated # of Audience/Observers	
# of Instructors	
Primary Venue	
Additional Venues	
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PROJECT NARRATIVE FY2016:

(Word Limit 1000 words)

Describe your proposed project in a clear and concise narrative. Be specific. Provide as many details as possible while answering the following questions in sequence. Use the question headings 1-7 and paragraph breaks in your response.

- 1. WHAT programs/camps/workshops or one time non-recurring events are proposed for the grant period?
- 2. WHO are the children/youth that will participate in the project (include demographics)?
 - a. How many children/youth will participate?
 - b. WHAT are their ages/gender?
 - c. WHERE do they come from (which schools/neighborhoods)?
 - d. How will they be selected/identified/recruited?
 - e. WHAT efforts will be made to include children/youth whose ability to participate in the project would otherwise be limited by geography, economics or disability.
 - f. WHAT cost, if any, will there be to the children/youth in order to participate
- 3. HOW will the children/youth actively/directly participate in the arts experience
 - a. How will they benefit?
 - b. WHAT will they learn?
- 4. WHO are the artistic personnel (artists/instructors) involved with implementing the proposed project and WHAT experience and qualifications do they have?
- 5. Can you give examples of other activities that demonstrate the organizations track record, expertise and ability to present this youth arts program?
- 6. WHY should this project be funded?

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PROJ	ECT	DE	TAILS
(Word	Limi	t 500	0)

How will this proposed project be of benefit to your organization's current activities and how will it enable the organization to broaden its reach to provide high quality, active/direct participation and enriching experiences for children and youth.

Describe the impact funding from the Grants Program would have on your organization to create positive, stimulating, artful and educational experiences for children and youth.

Be sure to address programmatic, administrative and technical implications.

Will your organization be partnering with any other entity in order to implement the proposed project? If so describe the nature of the partnership and include a current signed letter of agreement/commitment from each partner mentioned. See upload field at bottom of application.

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Bios of Key Personnel

(Word limit 500)

Please include bios of key personnel, artist(s) and/or instructor(s) featured for this proposal.

SUMMARY DESCRIPTION

(Word Limit 50)
Please include a summary description of the program to be included in Creative Pinellas media and collateral materials:
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UPLOADS
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Upload up to 5 files of support materials below (e.g. work samples, brochures, programs, news articles, letters of recommendation, student/teacher/parent testimonials, study guides, photos, etc.)
Or
For video links, place them in the field further below. Multiple links, may be placed there.

Video links/URLs
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CERTIFICATION
By submitting this application I certify that the information submitted is true and correct to the best of my knowledge, that I am the representative of the organization authorized to make this submission, and that the uploaded documents are authentic representations for the organization.
I understand the certification statement and am ready to submit