

# K-12 Student Scholarship March 1, 2017 Deadline

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*East Central Regional Arts Council*

## Section 1: Student's Personal Information

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**First Name\***

*Character Limit: 20*

**Last Name\***

*Character Limit: 20*

**Mailing/Street Address or P.O. Box #\***

*Character Limit: 40*

**City\***

*Character Limit: 30*

**Zip Code\***

*Character Limit: 10*

**Student's School as of March 1, 2017\***

*Character Limit: 200*

**City Where Student's School Is Located\***

*Character Limit: 30*

**Student's County of Permanent Residence\***

(and township if a rural address)

*Character Limit: 200*

**Student's Grade as of March 1, 2017\***

*Character Limit: 200*

**Allow release of student's name and city?\***

Please note that the student's personal information is not open to the public. The student's name and city of residence will be released only if you give permission. Do you allow release of the student's name and city?

**Choices**

Yes

No

## Section 2: Project Request

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### Scholarship Project Title\*

Examples: Visual Art Camp; Music Lessons; Dance Mentorship.

Character Limit: 100

### Total Scholarship Project Cost\*

Character Limit: 20

### Source Of Other Funds For Scholarship Project (if any)\*

(Enter "None" If no other funds)

Character Limit: 1000

### Amount Requested from ECRAC\*

(Max \$500) Please round up to the nearest dollar.

Character Limit: 20

## Section 3: Project Description

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### Explain specifically what the Scholarship money will be used for.\*

What is the artistic program or who are the instructors/mentor? Also, submit a budget for the project (for example explain how many lessons you will have and how much each lesson will cost, or include transportation expenses, etc. Basically have your parent help you decide the total costs and include them within this section in addition to your explanation of the project.)

Character Limit: 4000

### Have you been accepted by the instructor or into this program?\*

#### Choices

Yes

No

Don't Know

## Section 4: Artistic Goals

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### What are your long-term goals as an artist?\*

Character Limit: 2000

### How will the proposed artistic project and this scholarship help you achieve your goals?\*

Character Limit: 3000

## Section 5: Artistic Background

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### What current arts activities are you involved in at school?\*

*Character Limit: 2000*

### What arts activities do you participate in outside of your school?\*

*Character Limit: 3000*

### Reference Details\*

Provide two references documenting your participation in the arts. Example - teachers, administrators, community members, etc.

In the space provided below, include your reference's:

- names;
- email addresses;
- city, state;
- and your relationship to them.

*Character Limit: 1000*

### Statements from two References.

Upload your reference letters in the upload space provided below. Be sure your reference letters include their signature. PDF's are recommended.

### Statement from Reference (upload #1)\*

*File Size Limit: 2 MB*

### Statement from Reference (upload #2)\*

*File Size Limit: 2 MB*

### Describe Special Honors or Awards\*

Describe what, if any, special honors or awards directly related to your arts involvement you have received.

*Character Limit: 2000*

### Accomplishments in your Arts Discipline

A minimum of two supporting samples demonstrating your accomplishments in your arts discipline are required. Example: copies of photographs, programs, writing excerpts, etc.

### Accomplishment Sample Descriptions\*

In the space below, for each sample, include:

- the title of the sample artwork or art form
- a brief description of each sample submitted

*Character Limit: 1000*

### **Accomplishment Sample Uploads**

Attach the samples in the upload section provided below. PDFs or jpgs are recommended.

#### **Supporting Samples (upload #1)\***

*File Size Limit: 5 MB*

#### **Supporting Samples (upload #2)\***

*File Size Limit: 5 MB*

#### **Additional Supporting Documents (optional)**

Combine additional documents into one file, as needed.)

*File Size Limit: 5 MB*

## *Section 6: Need and Merit*

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### **Artistic Activity\***

Is the artistic activity proposed a continuation of training, a repeat experience, or something you have not done before?

*Character Limit: 3000*

### **Why and how would this Scholarship be beneficial to your artistic skills?\***

*Character Limit: 3000*

**Include a résumé of your artistic mentor/instructor and/or information on arts workshops, camp, classes (e.g. brochures or webpages), as applicable to your proposed scholarship project. PDFs are recommended.**

### **Resume of Artistic Mentor/Instructor**

*File Size Limit: 2 MB*

### **Camp, Class and/or Workshop Information**

*File Size Limit: 3 MB*

### **Additional Resume or Class/Workshop Information**

*File Size Limit: 2 MB*

## *Section 7: Regional Arts Council (RAC) Data Collection*

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### **RAC Grant Data Collection\***

These reporting fields are not used in the evaluation of your grant request and are simply used for data collection purposes.

**Choices**

I understand

**Are you a new applicant?\***

**Choices**

Yes

No

**County\***

Choose the Region 7E county below in which you live.

**Choices**

Chisago

Isanti

Kanabec

Mille Lacs

Pine

**MN House District\***

MN legislative house district where you live ([Click Here](#) to use the district poll finder).

**(Due to redistricting, be sure to use the District Poll Finder for the correct House District.)**

**Choices**

11B

15A

32A

32B

39A

**Congressional District\***

U.S. Congressional District where you live. To be eligible to apply you must live within the five county East Central Minnesota Region which is Congressional District 8.

**Choices**

8

**Special Characteristics (optional)**

**For Individuals:** select any combination that applies to you.

**Choices**

D Disability

S Adult older than 60

V Veteran

### Race/Ethnicity (optional)

**For Individuals:** Please select up to two options regarding your racial/ethnic characteristics. This information is not made public.

#### Choices

- N American Indian/Native American
- A Asian
- P Native Hawaiian/Pacific Islander
- B Black/African American
- H Hispanic/Latino
- M Middle Eastern/North African
- W White
- 99 when no single group applies (for organizations only)
- O Other

#### Status\*

Select the one code that best describes you. [Click Here](#) for a list of current **Status** codes.

**(Enter "01" for individual).**

#### Choices

- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09
- 99

#### Institution\*

Select the one code that best describes you. [Click Here](#) for a list of current **Institution** codes.

**(Enter "01" for individual artist).**

#### Choices

- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09

- 10
- 11
- 12
- 13
- 14
- 15
- 16
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- 50
- 51
- 99

**Discipline\***

Select one code that best describes your primary area of interest in the arts. [Click Here](#) for a list of current **Discipline** codes (i.e. enter "01A" for Dance, ballet).

**Choices**

- 01
- 01A
- 01B
- 01C
- 02
- 02A
- 02B
- 02C
- 02D
- 02E
- 02F
- 02G
- 02H
- 02I
- 03
- 03A
- 03B
- 04
- 04A
- 04B
- 04C
- 04D
- 04E
- 05
- 05A
- 05B
- 05D
- 05F
- 06
- 06A
- 06B
- 06D
- 06E
- 06F
- 06G
- 07
- 07A
- 07B
- 07C
- 07D
- 07E
- 07F
- 07G
- 07H
- 07I
- 08
- 09
- 09A
- 09B



- 09C
- 09D
- 09E
- 10
- 10A
- 10B
- 10C
- 10D
- 11
- 12A
- 12B
- 12C
- 12D
- 13
- 14
- 15

**Project Discipline\***

Select one category that best describes the proposed project activity. [Click Here](#) for a list of current Discipline codes.

**Choices**

- 01
- 01A
- 01B
- 01C
- 02
- 02A
- 02B
- 02C
- 02D
- 02E
- 02F
- 02G
- 02H
- 02I
- 03
- 03A
- 03B
- 04
- 04A
- 04B
- 04C
- 04D
- 04E
- 05
- 05A
- 05B
- 05D

- 05F
- 06
- 06A
- 06B
- 06D
- 06E
- 06F
- 06G
- 07
- 07A
- 07B
- 07C
- 07D
- 07E
- 07F
- 07G
- 07H
- 07I
- 08
- 09
- 09A
- 09B
- 09C
- 09D
- 09E
- 10
- 10A
- 10B
- 10C
- 10D
- 11
- 12A
- 12B
- 12C
- 12D
- 13
- 14
- 15

**Does your proposed project involve a public event?\***

**Choices**

- Yes
- No

**Adult Artists Participating\***

Estimated number of adult audience participants benefiting directly from grant activities.

*Character Limit: 10*

**Adult Audience Benefiting\***

Estimated number of adult artists directly involved in or providing art or artistic services specifically identified with grant activities.

*Character Limit: 10*

**Children/Youth Benefiting\***

Estimated number of children and youth under the age of 18 participating in and/or benefiting directly from these grant activities, or included in an audience. Your answer should be at least 1, you.

*Character Limit: 10*

**Total Project Expenses\***

*Character Limit: 20*

**Counties Impacted\***

Please provide a list of counties (Minnesota only) that will be impacted by this project. Your county of residence should be one.

*Character Limit: 500*

**Section 8: Signatures****Student Signature\***

**I, the undersigned, am a K-12 student and I want to apply for a scholarship to further my artistic goals!**

Typed Name

*Character Limit: 30*

**Date of Signature\***

*Character Limit: 10*

To the parents and guardians of East Central Regional Arts Council Scholarship recipients:

**I, the undersigned, am a parent or legal guardian having custody of the minor child named above. I am authorizing this application to the ECRAC Student Scholarship program pursuant to the [ECRAC guidelines](#). I understand that payment for the Scholarship, if received, will be made out to the child and the mentor or program, unless other arrangements are made. I understand that only the child's name and city will be released if I authorize it.**

**Signature of Parent or Guardian\***

Typed Name

*Character Limit: 40*

**Date of Signature\***

*Character Limit: 10*

**FYI - To ensure all application files have uploaded and will open properly for reviewers, applicants should use the "Application Packet" button located at the top of the application. Any file upload errors will appear on the "File Attachment Summary" page in the Application Packet.**

**Contact ECRAC staff via email at [info@ecrac.org](mailto:info@ecrac.org) or by telephone at 320-396-2337 if you need assistance or have any questions or concerns regarding your application. If requested early enough in advance of the grant deadline, ECRAC staff can review your draft application.**