

Art in Our Schools February 1, 2017 deadline

East Central Regional Arts Council

Section 1: School Information

Applicant School*

Character Limit: 200

District Number*

Character Limit: 4

Address*

Character Limit: 250

Mailing Address (if different)

Character Limit: 250

City, State, Zip*

Character Limit: 250

Project Director/Title*

Character Limit: 250

Project Director Email address*

Character Limit: 254

Project Director Phone (day)*

Please enter the 10 digit phone number with no special formatting.

Character Limit: 10

Grant Writer/Title*

Character Limit: 250

School Website*

Character Limit: 2000

Section 2: Project Information

Names of Artists

Character Limit: 250

OR

Field Trip Location

Character Limit: 250

OR

Arts Related Special Project

Character Limit: 250

Type(s) of Art Featured*

Character Limit: 250

Number of Professional Artists Participating*

Character Limit: 5

Number of Students Participating*

Character Limit: 5

Number of Teachers Participating*

Character Limit: 5

Number of Anticipated Audience for your Community Component*

Character Limit: 5

Project Title*

Character Limit: 100

Brief Project Description*

Character Limit: 500

Project Start Date*

See [Grant Guidelines](#), page 7, for start and end date requirements.

Character Limit: 10

Project End Date*

Character Limit: 10

Amount of Grant Request - up to \$3,000*

Character Limit: 20

Total Project Cost*

Character Limit: 20

Selection Decision*

What art discipline, artist, arts field trip, or arts related special project have you selected and why? Attach project director and artist résumé/s and/or other support materials. Keep in mind that artistic excellence is the goal for this funding program.

Character Limit: 1000 | File Size Limit: 1 MB

Additional Upload

File Size Limit: 1 MB

Additional Upload

File Size Limit: 1 MB

Additional Upload

File Size Limit: 1 MB

Planning Process and Goals*

Briefly describe the planning process and goals you have for this art project. How is the project different from past projects? **Keep in mind that ECRAC cannot fund repeat Art In Our Schools grant projects.**

Character Limit: 1000

Description of Project*

Describe the proposed grant project. Examples:

- What core group or classes of students will work daily with the artist?
- How will this project be integrated into the current arts curriculum?
- How will you present the teacher in-service training and set up the schedule?

FYI - The dates, times, rooms, locations of residencies and field trips should be reflected on the enclosed Residency or Field Trip Schedule in section 3.

Character Limit: 1000

Community Involvement*

Describe how you will make a presentation of this project to your community, or how it will be open to the public during or after its completion. **This community component is a requirement.**

Character Limit: 1000

Promotion and Publicity Plan*

Detail here how your organization will provide promotion and publicity for the community component of the project.

Character Limit: 1500

Section 3: Uploads and Certification

DataArts Information*

Submit your school program's [DataArts](#), formerly known as the Cultural Data Project, information as a PDF file. Use the ECRAC funder report.

FYI - This can be from your Department Budget.

File Size Limit: 2 MB

Residency Program Upload

Please download, complete and upload the [Residency Schedule](#) below.

File Size Limit: 1 MB

Field Trip Schedule

Please download, complete and upload the [Field Trip Schedule](#) below.

File Size Limit: 1 MB

Expenses*

Please download, complete and upload the [Project Expense Template](#) below.

File Size Limit: 2 MB

Project Expense Details and Explanations*

Include any project expense details and explanations here, as applicable.

Character Limit: 1500

Project Income*

Please download, complete and upload the [Project Income Template](#) below.

File Size Limit: 2 MB

Project Income Details and Explanations*

Include any project income details and explanations here, as applicable.

Character Limit: 1500

Certification*

Please download, complete and upload the [Certification](#) form below.

File Size Limit: 2 MB

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 error messages will appear on the "[File Attachment Summary](#)" page in the Application Packet.

Contact staff via email at info@ecrac.org or by telephone at 320-396-2337 if you 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.

Section 4: Regional Arts Council Data Collection

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 county below in which your school is located.

Choices

Chisago

Isanti

Kanabec

Mille Lacs

Pine

MN House District*

MN legislative house district where the applicant is located ([Click Here](#) to use the district poll finder).

Due to redistricting be sure to check Poll Finder for the correct House District

Choices

11B

15A

32A

32B

39A

Congressional District*

U.S. congressional district where the applicant is located. 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.

For Organizations: select the one code that best represents 50% or more of your staff, board, or membership.

Choices

I 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.

For Organizations: Please select the option that best represents 50% or more of your staff or board or membership.

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 the applicant. [Click Here](#) for a list of current **Status** codes (i.e. enter "01" for individual).

Choices

01
02
03
04
05
06
07
08
09
99

Institution*

Select the one code that best describes the applicant. [Click Here](#) for a list of current **Institution** codes (i.e. enter "01" for individual artist).

Choices

01
02

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- 04
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99

Discipline*

Select one code that best describes the applicant's 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
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- 07G
- 07H
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- 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
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- 03A
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- 04A
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- 04C
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- 09E
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- 12B
- 12C
- 12D
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- 15

Does your proposed project involve a public event?*
Choices

Yes

No

Adult Artists Participating*

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

Character Limit: 10

Adult Audience Benefiting*

Estimated number of adult audience participants benefiting directly from 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.

Character Limit: 10

Total Organization Expenses*

List the total organization expenses for the most recently completed fiscal year.

Character Limit: 20

Department's Total Arts Budget for Previous Fiscal Year:*

Character Limit: 20

Total Project Expenses*

Character Limit: 20

Cash Expense of Project*

This number should be the total amount of the project minus the total amount of any in-kind revenue listed in your budget.

Character Limit: 20

Project In-Kind*

This number should be the total amount of any in-kind revenue listed in your budget.

Character Limit: 20

Start Date*

The starting date should be approximately one month before your project is to take place or before you have to contract for services. *(This date **cannot** be before the grant deadline's earliest possible starting date listed in the guidelines.)*

Character Limit: 10

End Date*

The ending date should be approximately one month after the actual completion date of your project to allow time to close out all aspects of the project before submitting your final report.

Character Limit: 10

Counties Impacted*

Please provide a list of counties (Minnesota only) that will be impacted by this project.

Character Limit: 500

School Board Members*

Please provide a list of School Board Members. Enter first and last name only, separated by commas.

Character Limit: 1000