

**MERIDIAN COUNCIL FOR THE ARTS  
COMMUNITY ARTS GRANT  
ORGANIZATION APPLICATION FORM**

1. Name and Address of Organization:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

County District: \_\_\_\_\_ City Ward: \_\_\_\_\_

2. Name of Project: \_\_\_\_\_

3. Grant Category: \_\_\_\_\_

4. Annual income for last completed fiscal year: \$ \_\_\_\_\_

5. Total amount of estimated project expenses: \$ \_\_\_\_\_

6. Amount of funds requested: \$ \_\_\_\_\_

7. Year organized: \_\_\_\_\_

8. IRS letter attached:  Yes  No

9. Date of proposed program: \_\_\_\_\_

10. Grant Data. Complete the following projected attendance data

	FY 2005-2006 Projected	FY 2004-2005 Actual
Total Artists:		
• American Indian		
• White		
• Asian		
• Black		
• Hispanic		

Total Attendance:		
• Children/Youth (under 18)		
• Senior Citizens (over 65)		
• People with disabilities		
• American Indians		
• White		
• Asian		
• Black		
• Hispanic		
Total volunteers:		

We certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of our knowledge and the board of directors has authorized this application.

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Authorizing Official Signature

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Typed Name and Title

Date

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Business Phone

Home Phone

NOTE: Applicants for collaboration projects must attach a copy of this form, completed by each organization named in the proposal, and submit a written statement verifying participation in the project.

Proposal No. \_\_\_\_\_

Date Received: \_\_\_\_\_

# GRANT BUDGET FORM

## Expenses

### Personnel

Salaries, Wages \_\_\_\_\_

FICA (Social Security) \_\_\_\_\_

Other (Itemize on separate sheet) \_\_\_\_\_

**SUBTOTAL \$** \_\_\_\_\_

### Contractual Services

Artistic Fees \_\_\_\_\_

Technical Fees \_\_\_\_\_

Other \_\_\_\_\_

**SUBTOTAL \$** \_\_\_\_\_

### Remaining Operating Expenses

(Itemize on separate sheet) \_\_\_\_\_

### Marketing

(Itemize on separate sheet) \_\_\_\_\_

### Supplies & Materials

Office supplies \_\_\_\_\_

Printing/Copying \_\_\_\_\_

Artists' Materials \_\_\_\_\_

Postage \_\_\_\_\_

Other (Itemize on separate sheet) \_\_\_\_\_

**SUBTOTAL \$** \_\_\_\_\_

**Other** (Itemize on separate sheet) \_\_\_\_\_

### **TOTAL PROJECT EXPENSES**

(Total of above)

**\$** \_\_\_\_\_

**Income:** *\*Match income for awarded MCA grant only.*

**Arts Council** (Community Arts Grant) grant requested \_\_\_\_\_

**Other Income**

**Organization funds** (existing cash) \_\_\_\_\_

**Contributions** (if unknown, please estimate) \_\_\_\_\_

Corporate \_\_\_\_\_

Foundation \_\_\_\_\_

Private \_\_\_\_\_

Government \_\_\_\_\_

Federal \_\_\_\_\_

State/Regional \_\_\_\_\_

City/County \_\_\_\_\_

**Admissions** (please estimate) \_\_\_\_\_

**TOTAL OTHER INCOME \$** \_\_\_\_\_

(Must be at least equal to grant request)

**TOTAL PROJECT INCOME \$** \_\_\_\_\_

(Must be equal to project expenses)

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**Project Itemized In-Kind Contribution** (Do not include as match)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Total In-Kind: \$** \_\_\_\_\_