

Community Arts Access Grant:

McLean County Arts Center & Illinois Arts Council Agency

The independent Grant Review Committee has determined the following list of priorities, in order of importance, with which they will determine the ranking of applications. Please address these carefully in your application.

Funding Priorities:

- Support the quality, quantity, promotion and visibility of arts for the community
- Increase access and outreach to the arts for underserved populations
- Foster collaboration among organizations and/or individual artists

Project Plan:

- Clarity in description of project
- Degree to which project fulfills its purpose
- Quality of planning and implementation

Collaboration:

- Collaboration among organizations and individuals
- Encourages and promotes cooperation and pooling of resources

Budget:

- Balanced proposed budget page
- Evidence of cash match and in-kind contributions
- Evidence of additional and alternative funding sources

Outcomes:

- Evidence of attainable, measurable and manageable outcomes

Organizational Capacity:

- Evidence of fiscal accountability of applicant
- History of sound management practices

Completeness of Application:

- All requested information provided by the deadline
- Prior grant final report or progress report submitted

The following items are not eligible for funding as explicitly stated in the McLean County Arts Center's Grant Agreement with the Illinois Arts Council Agency:

1. Capital expenditures
2. Permanent equipment
3. Out-of-state touring
4. Scholarships
5. Deficit Funding

Part I. General Information

Organization:

Full Name

Street Address

Street Address Line 2

City

Zip Code

E-mail

Phone

Organization Website

Date of Not for Profit incorporation

Dates of Fiscal year

Which best describes this application

Arts in Education

Music

Dance

Literature

Media Arts

Multi-Disciplinary

Symphony

Theatre

Visual Arts

Ethnic / Folk Arts

Other

State House District

State Senate District

US Congressional District

Part II. Financial Data

Organization's Annual Budget

Project Budget

Funds Requested (limit \$2,000)

Part III: Audience Information

Please provide information on proposed audience demographics for the proposed program:

Number of programs proposed

Yearly Attendance

Program Attendance

Volunteers Participating

Children Participating

Seniors Participating

Artists Participating

Part IV: Proposed program

Name of Program:

Date(s), Time(s), Location(s) of Program:

Is the program/project open to the public?

Yes No

How will the program be publicized?

Who will serve as the Program Administrator(s):

Has your organization received funding from the Community Arts Access program in the past?

Yes No

Has your organization applied to the Illinois Arts Council or other regrating agency for the same program?

Yes No

Number of Full Time Staff:

Number of Part Time Staff:

Your Organization's Mission Statement:

Part V: Audience

Describe the needs of the projected audience for your proposed project. Would you consider the project audience underserved by existing programs or diverse, minority, low income, disable and rural people that will benefit from your project.

How will the proposed program make up the difference if your anticipated cash income sources are not met or if the organization receives no funding, or less than full funding from the regranting program? Will the project be abandoned?

Part VI: Program Budget

Expenses- please summarize the program's expenses by category. (Program materials, supplies, equipment rental, marketing and advertising, etc.) Indicate how much of each category's expenses will be paid by this Grant. Remember to include in-kind contributions by volunteers and members.

Program Materials

Supplies

Equipment

Marketing

Advertising

Other

Income- Summarize below the program's income by source. The income line should, of course, be equal to the expense line in part VI A. This grant line must be no more than 50% of the total income.

Applicant's Cash

This Grant (Expected)

In-kind Contributions

Total Income

Please Provide "Corporation File Detail Report" indicating your organization's status as a non-profit in good standing. This is available from the Secretary of State's office at www.cyberdriveillinois.com

Rename document as organization initials and 501c3. Example The Bloomington Center for the Performing Arts will name their file "BCPA501c3"

Submit this document under an additional email with the attachment name in the subject line.

Submit