Grassroots Arts Program Subgrant Application FY 2023-2024



Submit this report to your funding agency. It should not be submitted to the North Carolina Arts Council.

l.	Organization Informati	ion	
Name	of Organization		
Contac	ct Person's Name		
Contac	ct Person's Title		
Mailin	g Address	City	
State:	North Carolina Zip Code	County	
Work I	Phone ()	Fax Number ()	
E-mail	Address		
Websit	te		-
Organi	zation's EIN		
Organi	zation's UEI		
Applica	ant Race		
curren large g	t arts programs and services an	organization, including mission, but number and kinds of people selencies should provide a description	rved. Public schools and other
<u>Organ</u>	izational Finances:		
year ai other l	nd complete operating budgets	for the current fiscal year and ne ity agencies should attach arts pr	oe substituted) for your last fiscal xt fiscal year. Public schools and ogram financial information only.
Last Y	ear Actual FY	Current Year FY	Next Year FY
Actua	al Income \$	Income \$	Projected Income \$
Actua	ıl Expenses \$	Expenses \$	Projected Expenses \$

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II.	Proi	ect	Descri	ntion
			DC3CI I	Puon

(No earlier than July 2022)
(No later than June 15, 2023)

Project Narrative:

Please attach a narrative providing the information requested below for the project you propose. Please be concise and specific as possible:

- 1. Project title or summary description
- 2. Project goals
- 3. Description of intended participants/audience, including estimated numbers and racial and cultural composition
- 4. Location where project will take place
- 5. Description of project activities
- 6. Description of the artists to be involved in the project, how and why they were chosen and, if appropriate, the rate of payment for their services (If you have not yet selected the artists, describe the kinds of artists you intend to involve and how you will select them.)
- 7. Description of how the project will be publicized and promoted to reach intended participants
- 8. Description of how you will evaluate the project

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Project Budget:

Please provide a projected budget for your proposed project utilizing the format below.

Pro	oject Expenses	Cash Expenses	=	Grant Amount Requested	+	Applicant Cash Match
	Personnel 1. Administrative Staff 2. Artistic Staff 3. Technical/Production Staff					
В.	Outside Fees and Services 1. Artistic Contracts 2. Other Contracts					
D. E. F.	Space Rental Travel Marketing Remaining Project Expenses Total Cash Expenses		=		+	
Pro	ject Income					
В. С.	Admissions Contracted Services Revenue Other Revenue Private Support 1. Corporate Support 2. Foundation Support					
	 Other Private Support Government Support Federal State/Regional Local Applicant Cash 					
	Grant Amount Requested in this application					
н.	Total Cash Income (Must at least equal Total Cash					

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Certification

We understand that failure to respond to any of the above items may adversely affect the consideration of this application. We certify that we are committed to the completion of the proposed project in compliance with legal requirements and granting procedures. We certify that the information contained in this application, including attachments and supporting materials, is true and correct to the best of our knowledge.

Name and Position of Authorizing Official		
Signature of Authorizing Official	Date	-
Signature of Contact Person	Date	