**Fiscal Year:** **2025-2026**

1. **Organization Information**

Name of Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person’s Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: North Carolina Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone (\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization’s EIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization’s UEI\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please give a brief description of your organization, including mission, board and staff composition, current arts programs and services and number and kinds of people served. Public schools and other large governmental or community agencies should provide a description of their arts program only rather than the entire organization.

**Organizational Finances:**

Please attach a projected operating budget for the year in which the grant funds will be used. Also, include completed operating budgets for the previous two years. Public schools and other large governmental or community agencies are exempt from this requirement. Please copy the totals from these attachments in the spaces below.

|  |  |  |
| --- | --- | --- |
| Last Year Actual FY 2024-2025 | Current Year 2025-2026 | Next Year FY 2026-2027 |
| Actual Income $ \_\_\_\_\_\_\_\_\_\_\_\_ | Income $ \_\_\_\_\_\_\_\_\_\_\_\_ | Projected Income $ \_\_\_\_\_\_\_\_\_\_\_\_ |
| Actual Expenses $ \_\_\_\_\_\_\_\_\_\_\_\_ | Expenses $ \_\_\_\_\_\_\_\_\_\_\_\_ | Projected Expenses $ \_\_\_\_\_\_\_\_\_\_\_ |

**Project Description**

Projects must take place between July 1, 2025 and June 15, 2026.

**Grant Amount Requested**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Start Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project End Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Narrative:**

Please attach the narrative information requested below for the project you propose.

Please be as 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 the project will take place.

5. Description of project activities.

6. Description of the artists 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.

9. Will this award support multicultural artists and/or organizations? If so, please list the artists/organizations.

1. **Project Budget**

Please provide a projected budget for your proposed project. This is not your organizational budget.

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Expenses** | Cash Expenses = | Grant Amount + Requested | Applicant Cash Match |
|  |  |  |  |
| 1. **Personnel** |  |  |  |
| 1. Administrative Staff | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Artistic Staff | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Technical/Production Staff | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Outside Fees and Services** |  |  |  |
| 1. Artistic Contracts | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. Other Contracts \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Space Rental** | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Travel** | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Marketing** | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Remaining Project Expenses** | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Total Cash Expenses** | \_\_\_\_\_\_\_\_\_\_\_\_ = | \_\_\_\_\_\_\_\_\_\_\_\_ + | \_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |  |
| **Project Income** |  |  |  |
|  |  |  |  |
| 1. **Admissions** | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. **Contracted Services Revenue** | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. **Other Revenue** | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. **Private Support** |  |  |  |
| 1. Corporate Support | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. Foundation Support | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. Other Private Support | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. **Government Support** |  |  |  |
| 1. Federal | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. State/Regional | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. Local | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. **Applicant Cash** | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. **Grant Amount Requested in this application** | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| 1. **Total Cash Income (Must be equal to or more than Total Cash Expenses)** | \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

**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.

Signature of Authorizing Official \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Position of Authorizing Official

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