



REGIONAL ARTIST PROJECT GRANT APPLICATION 2011-2012

APPLICATION DEADLINE

Applications and support materials must be received (not postmarked) by 5:00 PM Monday, July 25, 2011. **Applications must be emailed to dsilver@intothearts.org, additional support materials must be mailed or hand delivered. Late applications will not be accepted.**

APPLICATION REQUIREMENTS

Follow all instructions on application. Incomplete applications will not be considered for funding. **If you are copying and pasting information into this document use 11 point font. All applications should be emailed to the Manager of Funded Partner and Grant Programs. Please contact the Manager of Funded Partner and Grant Programs for assistance at 336.722.2585 ext. 1121.**

APPLICANT INFORMATION

Complete all information below. If your contact information changes at any point during the grant process or period it is your responsibility to contact the Manager of Funded Partner and Grant Programs.

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (Day) _____ (Evening) _____

E-mail Address: _____ Website: _____

County: _____ Length of Residence: _____

Have you received a Regional Artist Project Grant in the past three years? No Yes

If yes when did you receive the grant? _____

Grant recipients in 2010-2011, 2009-2010, 2008-2009 are not eligible. Students currently enrolled in University programs are not eligible.

CULTURAL DIVERSITY DATA

Demographic information is for the North Carolina Arts Council grant reporting purposes only and will not be used in the selection process.

African American	Asian	Caucasian	American Indian/Alaskan Native
Hispanic/Latino	Native Hawaiian/Pacific Islander	Other	

TYPE OF APPLICATION

Indicate if you are applying as an individual or as a group of artists.

Individual Application

Group Application (SEE SUPPORTING MATERIALS)

ARTISTIC DESCRIPTION

Dance

Drama

Film/Video

Literature/Playwright

Music

Visual Art/Craft

PROJECT DESCRIPTION

In the space provide respond to the questions below about the project you are proposing. Panelists will evaluate the project based on the criteria listed in the **review process section** of the guidelines.

Provide a description and timeline of the proposed project in the space provided below. (450 word max at 11 point font)

PROJECT DESCRIPTION (continued)

How will this project further your artistic career goals? **(250 word max at 11 point font)**

How does this project fit into the larger scope of your work? **(300 word max at 11 point font)**

PROJECT DESCRIPTION (continued)

Provide a brief summary of your project in 3 to 4 sentences. (this will be used for publicity if grant is awarded)
(75 word max at 11 point font)

PROPOSED BUDGET

What is the total cost of this project: _____
Round figures to the nearest whole number; \$500.00 not \$499.50

Amount of grant funds requested: _____

Can you complete this project with partial funding? Yes No

If you are partially funded, panelists will note the portion of the project funding should be used for.

Are you pursuing other funding sources? Yes No
(If yes, list other sources)

Are you applying for any other Arts Council Grants? Yes No
(If yes, list which grants)

Sample Budget Chart

PROJECT: Workshop at Penland

TYPE OF EXPENSE	AMOUNT
Tuition	500
Room and board	400
Travel	70
Class Supplies	100
Multi-purpose bookbinding press	545
Book cloth, 12' @ 11.25	135
Paper	150
Total Project Cost	1900

CERTIFICATION

I certify that the information contained in this application and all supporting material is true and correct to the best of my knowledge. I certify that I am committed to the completion of the proposed project in compliance with legal requirements and granting procedures. I acknowledge that although all appropriate care will be taken of my supporting materials, The Arts Council of Winston-Salem and Forsyth County will not be held responsible for possible damage or loss of these materials.

Applicant Signature

Date

I will email this application to the Manager of Funded Partner and Grant Programs at the following email address: **dsilver@intothearts.org**

I have mailed all supporting materials to the Manager of Funded Partner and Grant Programs at The Arts Council of Winston-Salem and Forsyth County, 305 West 4th Street, Winston-Salem, NC 27101.

SUPPORTING MATERIALS: MUST BE MAILED TO THE ARTS COUNCIL

All supporting materials must arrive (not postmarked) in a single package on Monday, July 25, 2011 by 5:00 PM to the following address:

The Arts Council of Winston-Salem and Forsyth County
ATTN.: GRANTS RAPG
305 West Fourth Street, Winston-Salem, NC 27101

1. RESUME: Enclose a resume indicating the applicant's education, employment, artistic accomplishments (exhibitions, commissions, publications, honors, performances, etc.) and other relevant biographical information. Include awards, grants, and fellowships received by the applicant. If a group of artists is applying, include a resume for each applicant.

2. RECOMMENDATION FORM: Please have two individuals fill out recommendation forms on your behalf. The individuals should be familiar with your work and support your proposed project. Personal references are less effective than professional recommendations. **Recommendations must be included in your supporting materials packet. Recommendation forms are online. Do not send recommendation forms individually, please include them in the supporting materials package.**

3. WORK SAMPLES: Applicants are required to submit examples of their artistic work. Work samples should be no more than three years old. Required materials for each discipline are listed below. **PLEASE DO NOT SEND ORIGINALS.**

DANCE, DRAMA, and FILM/VIDEO: DVD

Ten [10] minute sample of work. Label DVD with artist's name, title of work, date of completion, length, B&W or color, and production credits. Indicate track number you wish the panel to review. Those 10 minutes may cover more than one work sample.

LITERATURE/POETRY/PLAYWRIGHT: MANUSCRIPT

Ten [10] page maximum manuscript

Ten collated copies of the manuscript/play are required. (All photocopied manuscripts will be shredded or re-cycled after the competition.) Include a title page stating your name, address and year work was written. All pages must be numbered and must include a header with your name. Books, magazines, and photocopies thereof will not be accepted.

MUSIC/COMPOSERS: CD

Compact Disc Ten [10] minute sample of work. Label CD with artist's name, title of work, date completed, playing time and production credit. Indicate the track number you wish the panel to review. (Those 10 minutes may come from more than one work sample.) Composers may submit up to three scores. (only one copy is necessary)

VISUAL ART/ CRAFT: CD

Provide up to fifteen [15] images of artwork on a Compact Disc that demonstrate the applicants body of work. Note: Slides and printed photographs will not be accepted.

4. SUPPORT MATERIALS LIST: Include the support materials list on page eight (8) in your support Materials package.

5. GROUP APPLICANTS ONLY: Submit the names and brief biography of all group members.

6. SELF-ADDRESSED STAMPED ENVELOPE WITH SUFFICIENT POSTAGE: All supporting materials will be returned after the grant panel review. If a self-addressed stamped envelope is not included, support materials will be discarded.

REGIONAL ARTIST PROJECT GRANT SUPPORTING MATERIALS LIST

Please label all supporting materials with your name and contact information. Please fill out the information below if a category is not applicable to your work leave it blank. Support materials should be no more than 3 years old.

Name of Applicant: _____

Artistic Discipline: _____

Title of work	Medium or type of work	Size of work (visual artist only)	Number of the track(s) to play (video or cd only)	Date of work (should be no more than 3 years old)