



# Blue Water Arts Council Program/Project/Event Grant Application

10/2009

Grant funds are made possible from the Charles and Margaret Anderson Foundation Endowment Fund held at the Community Foundation of St. Clair County (CFSCC). The Blue Water Arts Council (BWAC) is the advisory committee for the CFSCC for granting decisions to be made in regards to arts and cultural programs and projects in the local Blue Water Area. The BWAC is comprised of local art organization leaders, supporters and artists who have been chosen to be representatives of the public interest and for their knowledge of the community. *Program/Project/Event Applications should be used by organizations who need funding to implement a specific program, project or event.*

### Eligibility:

Any charitable organization within the Blue Water Area working in the field of arts and culture and arts education is eligible to make application.

\*An evaluation is expected to be completed by all grant recipients.

### How to Apply:

There are two types of applications: (Program/Project or Operating Support) Complete appropriate application and send to:

Community Foundation of St. Clair County  
516 McMorran Blvd.  
Port Huron, MI 48060-3826  
Phone: 810-984-4761 Fax: 810-984-3394  
Email: [lindsay@stclairfoundation.org](mailto:lindsay@stclairfoundation.org)  
Web site: [www.stclairfoundation.org](http://www.stclairfoundation.org)

The attached Grant Application for Program/ Project/Event is divided into the following three sections:

1. Information about your organization
2. Information about program, project or event.
3. A detailed budget of revenues and expenses for the grant

Applications must be submitted using the BWAC Grant Application form. Please contact the office with any questions while preparing this application. Additional information or a site visit may be requested at any stage of the evaluation process. A representative from your organization may be contacted to present at a review meeting if deemed necessary.

### Grant Application Schedule for 2010:

<u>Application Deadline:</u>	<u>For Review:</u>	<u>Notification of outcome by:</u>
February 1, 2010	February 23, 2010	March 26, 2010
April 5, 2010	April 27, 2010	May 28, 2010
August 2, 2010	August 24, 2010	September 24, 2010
October 4, 2010	October 26, 2010	November 19, 2010



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Date of Application

Legal Name of Organization Applying:
(Should be same as on IRS determination letter and as supplied on IRS Form 990)

Year Founded: Current Operating Budget:

Executive Director or Board Chairperson:

Contact Person (if different from above):

Address (Principal / Administrative Office):

City / State / Zip:

Phone #: Fax #: Email:

Is this a 501(c)(3) organization?
Copy of IRS Tax Exempt letter is required.

Tax ID Number:

List any other sources of grant programs you are currently applying to for this same project:

List any previous support received from the Blue Water Arts Council or the Community Foundation of St. Clair County:

Project Name (one sentence):

Purpose of Grant (one sentence):

Dates of program or project: Amount Requested:

Geographic area and Art mediums your organization serves:

Estimate of individuals impacted #: Artists participating #:

Dollars to Artists #:

Signature of Chairperson, Board of Directors

Date

Typed Name and Title

Signature of Executive Director

Date

**Section 1: Description of the Organization**

**1A** Brief description the organization's history, goals, current programs and activities, specifically as they relate to the grant. (Use additional typed pages if necessary)

**1B** Names, terms of office, affiliations for Officers and Directors, organizational chart. (if available)

**1C** Additional information helpful in knowing about your organization

**Section 2: Summary of your proposed program, project or event:**

Please include all detail on program, project or event including date, time, place, mission, how it will promoted, who it will impact, partners involved, how it will enhance art and culture in our region, etc.

**Section 3: Program/Project Budget**

**3A** Time period for implementation of project: \_\_\_\_\_

**3B** \_\_\_\_\_  
Total cost of project

**3C** \_\_\_\_\_  
Amount requested from BWAC

**3D Description** of various budget categories (for a large financial request, make up your own more detailed form. (E.g. separate salaries, taxes, fringes or supplies, printing & copying.)

In most cases Revenues will equal Expenses, they are not equal include explanation. Please include specific information for any other pending or committed grants.

<b>Revenues:</b>	<u>Committed</u>	<u>Pending</u>
	Grants/Contracts/Contributions	
\$ _____	Local Government	\$ _____
\$ _____	State Government	\$ _____
\$ _____	Federal Government	\$ _____
\$ _____	Foundations (itemized)	\$ _____
\$ _____	Corporations (itemized)	\$ _____
\$ _____	Individuals (itemized)	\$ _____
\$ _____	Other (specify) _____	\$ _____

\$ _____	Earned Income	\$ _____
\$ _____	Events	\$ _____
\$ _____	Publications and products	\$ _____
\$ _____	In-kind support (specify)	\$ _____
\$ _____	Other (specify) _____	\$ _____
\$ _____	Totals for committed and pending:	\$ _____

**TOTAL REVENUES (committed + pending = Total Revenue)**  
 \$ \_\_\_\_\_

**Expenses:**

Salaries, pay-roll taxes, fringe benefits  
 \$ \_\_\_\_\_

Consultants and professional fees  
 \$ \_\_\_\_\_

Insurance  
 \$ \_\_\_\_\_

Travel  
 \$ \_\_\_\_\_

Equipment  
 \$ \_\_\_\_\_

Supplies (printing, copying, telephone, fax, postage)  
 \$ \_\_\_\_\_

Rent, utilities, maintenance  
 \$ \_\_\_\_\_

Evaluation  
 \$ \_\_\_\_\_

Marketing  
 \$ \_\_\_\_\_

Other (specify) \_\_\_\_\_  
 \$ \_\_\_\_\_

**TOTAL EXPENSES**  
 \$ \_\_\_\_\_

\*If revenues do not equal expenses please provide explanation.

**3E** \_\_\_\_\_  
 Executive Director or Chairperson      Phone \_\_\_\_\_  
 \_\_\_\_\_  
 Signature of Director or Chairperson

**3F** \_\_\_\_\_  
 Contact person responsible      Phone \_\_\_\_\_  
 \_\_\_\_\_  
 Signature of contact person