



Granville *Arts* Commission

PART 2 – GRANT APPLICANT INFORMATION

1. Event / Project Title

Location

2. Applicant Organization Information

Application Date:

Name of Applicant/Organization

Contact Person's Name

Contact Phone

Address

City

State

Zip Code

E-mail Address

Website

3. Application Type: (Check ONE in A OR B)

A. One time Events – Check ONE and Complete Part 3_

Individual Performances and Exhibitions

Group Performances and Exhibitions (one time)

Umbrella Events (e.g. festivals)

Other (List type)

B. Programs over a period of time – Check ONE and Complete Parts 3 and 4_

Projects (over period of time)

Arts Education Program

4. Arts Type: (Check ONE)

Visual Arts (List type)

Music

Film

Dance

Theatre

Literary Arts

Multi-Disciplinary

7. Have you done similar events/activities in the past? Yes No If Yes, give a brief explanation:

8. Please feel free to provide any additional information that you think may be helpful to the funding committee. Use **PART 5** for additional information.

9. Amount you are requesting (\$100 – \$1,000):

10. How will funding be used?

11. What will happen if you do not receive your full funding request?

12. Please complete applicable categories with budget numbers. Estimates are sufficient.

Categ	ory GAC Funds	Total Budget
Artist fees <i>including honorari</i>		
Supplies/Materials		
Equipment Rental Staging/		
Lighting		
Awards/Prizes		
Other <i>please describe</i>		

PART 4 – ADDITIONAL INFORMATION FOR PROGRAMS OVER A PERIOD OF TIME

1. If the activity that has been identified as requesting grant funds will be continuing over a period of time, how will the grant fit into your overall budget for the Program?

PART 5 – ADDITIONAL INFORMATION