

BAC COMMUNITY ARTS REGRANT PROGRAM

2011 NYSCA REGRANT APPLICATION

Instructions for completing the online form

NYSCA applicants must complete this form and submit one original and 9 copies, collated with their budget page. *All questions are required except where noted.*

APPLICANT INFORMATION

- 1. APPLICANT NAME:** May be an organization or individual artist name, pen name, informal group name, etc. This should NOT be the fiscal sponsor's name.
- 2. ARE YOU APPLYING AS AN ORGANIZATION OR AN INDIVIDUAL?** Select the appropriate choice.
- 3. APPLICANT'S ADDRESS (STREET ADDRESS/CITY/STATE/ZIP CODE):** Must be in Brooklyn, New York, and match the address on the applicant's proof of residency.
- 4. APPLICANT PHONE/EMAIL/WEBSITE:** The applicant's contact info. Website is an optional field; if supplied, panelists may view applicant websites prior to the panel meeting.
- 5. PRIMARY CONTACT (FIRST NAME/LAST NAME/EMAIL/PHONE NUMBER):** The name and contact info of the person who is primarily responsible for this application. For individuals, this is often the same as the information supplied above; organizations, use this space to tell us the name of the person at your organization we should contact.
- 6. APPLICANT'S LEGISLATIVE INFORMATION (COMMUNITY BOARD, NYC COUNCIL DISTRICT, NY SENATE DISTRICT, NY ASSEMBLY DISTRICT, US HOUSE DISTRICT):** From the drop down menu, select the appropriate legislative district number in each category based on your address. For help finding your district numbers visit the page on the BAC website titled 'Find Your Representatives'. The link to this page appears on the DCA Application page online.
- 7. APPLICANT'S ETHNICITY:** The ethnicity of the individual applicant, or the primary ethnic composition of the organization. Select the most appropriate choice from the drop down menu.
- 8. IS THIS YOUR FIRST TIME APPLYING FOR A BROOKLYN ARTS COUNCIL REGRANT?** Select yes or no.
- 9. HAVE YOU RECEIVED FUNDING BEFORE FROM A BROOKLYN ARTS COUNCIL REGRANT?** Select yes or no.
- 10. ARE YOU APPLYING WITH A FISCAL SPONSOR?** Select yes or no.

Applicants with fiscal sponsors: answer questions 11 through 13:

- 11. FISCAL SPONSOR ORGANIZATION:** Leave blank if no fiscal sponsor.
- 12. FISCAL SPONSOR'S ADDRESS (STREET ADDRESS/CITY/STATE/ZIP CODE):** To be a fiscal sponsor for a NYSCA Regrant, this address must be in Brooklyn, NY.
- 13. FISCAL SPONSOR'S CONTACT (FIRST NAME/LAST NAME/STREET ADDRESS/PHONE NUMBER/EMAIL):** The name of the person at the fiscal sponsor organization who is handling the sponsorship and their contact info.

Organizations applying without a fiscal sponsor: answer questions 14 through 16:

- 14. ORGANIZATION'S CHAIR/DIRECTOR/PRESIDENT:** The name of the organization's leader.

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15. TYPE OF ORGANIZATION: Select the best descriptor for the type of your or your sponsor's organization from the drop-down menu (i.e. performing, presenting, educational, community arts, senior center, etc).

16. DISCIPLINE OF ORGANIZATION: Select the best choice from the drop-down menu. Non-arts organizations should select 'Humanities', 'Non-arts/Non-Humanities', or 'Other' as appropriate.

ALL applicants: answer the following for either the applicant or fiscal sponsor:

17. APPLICANT ORGANIZATION OR SPONSOR'S NONPROFIT STATUS: Select from the drop down menu.

18. APPLICANT ORGANIZATION OR SPONSOR'S NONPROFIT STATUS IS THROUGH: Select the appropriate answer. Choices include: NY Department of State; NY Department of Education; Unit of Government/Indian Tribe; Other.

19. APPLICANT ORGANIZATION OR SPONSOR'S EIN (EMPLOYER IDENTIFICATION NUMBER): Not the tax-exempt #.

PROJECT OVERVIEW

22. ARTISTIC DISCIPLINE: Select **one** of the following artistic discipline options from the drop-down menu.

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| <input type="checkbox"/> Dance | <input type="checkbox"/> Folk Arts | <input type="checkbox"/> Music |
| <input type="checkbox"/> Drama/Theater | <input type="checkbox"/> Literature/Writing | <input type="checkbox"/> Opera/Musical Theater |
| <input type="checkbox"/> Film/Video/Media | <input type="checkbox"/> Multi-Discipline | <input type="checkbox"/> Visual Arts/Crafts/Photo |

23. PROJECT TITLE: The title of your proposed project. You will be able to change this later if your project is funded.

24. SHORT PROJECT DESCRIPTION: A very brief summary statement of your project (i.e. '*collaborative dance project with professional dancers and local teens*' or '*painting exhibit traveling to three library branches*'). **(Max 80characters)**

25. PROJECT START/END DATES (MM/DD/2011): The date by which you will start working on your project and the date by which your project will be completed. **Both dates must fall within the 2011 calendar year.**

26. NEIGHBORHOOD(S) SERVED: Base the 'neighborhood served' on the neighborhood in which your project is physically taking place and/or on where you anticipate drawing an audience from. Select up to 3 if needed; **only select 'borough-wide' if:** your project is physically traveling to more than 3 Brooklyn neighborhoods, or is a web-based or writing-distribution project.

27. NUMBER OF ARTISTS SERVED: The number of artists who will be benefiting in some way from your project or working on the creation of your project (i.e. number of dancers performing, number of teaching artists being paid, etc.) Artist-applicants, include yourself.

28. AGE GROUPS SERVED-ENTER AS WHOLE NUMBER, NOT PERCENTAGE

Estimate the total number of people in each of the following age groups that will be involved in and served by your project. Include artists working on the project, professionals paid, audience, community members, etc:

Children (0-18):_____ Adults (18-64):_____ Seniors (65+):_____

29. TOTAL NUMBER OF PEOPLE SERVED: Add up the total number of people involved in and served by your project.

30. ETHNIC GROUPS SERVED-ENTER AS PERCENTAGE (TOTAL MUST=100%)

Based on your knowledge of the community your project will serve, estimate the percentages of community members that fall into the following ethnic groups. Percentages should add up to 100%.

*Asian____% *Black/African-American____% *Hispanic/Latino____% *White, non-Hispanic____%
*Other____% *Mixed/No Single Group____%

PROJECT DETAILS

We strongly recommend composing your answers to the following questions in a word processing program such as Microsoft Word, and copying and pasting them into the text boxes supplied in the online application. This will allow you to easily spell check and count the characters in your answers. **Note: the character limits listed after each question include spaces.** Please do not use formatting such as bold face, underlining, italicizing, or bulleted lists; these types of formatting will be lost when you paste your text into the online text boxes.

31. PROJECT DESCRIPTION: Describe the project for which funds are being requested. Be sure your description relates directly to the project's budget. Describe the overall concept of your project. Provide specific information pertaining to the basic operation of your project, and include details like when your project will occur, the number of performances or duration of exhibit, etc. **Be sure that costs listed on your budget page are explained in your project description.** This is very important because it illustrates to the panel your managerial, planning, and fiscal competence. **(Max 2500 characters)**

32. WHERE WILL YOUR PROJECT TAKE PLACE? Where in Brooklyn will your project take place? Be as specific as possible. Discuss more than one location if applicable. Include the exact name of the site(s), and the neighborhood(s) in which your project will take place. Include in your supplementary materials a letter of confirmation (1 copy of each) from each location listed. **(Max 500 characters)**

33. WHO WILL BE INVOLVED IN YOUR PROJECT? List the personnel involved in your project and describe their function in relation to the project. Include staff members, artists, teaching artists, technical personnel, volunteers, consultants, community contacts, etc. When you submit your supplementary materials, include résumés (2 copies of each) for the project director and any key personnel identified in this section. **(Max 800 characters)**

34. WHO IS YOUR TARGET AUDIENCE? Clearly indicate the geographic location and demographic makeup of your target audience(s). Describe your reason for interest in the community(ies) the project will serve. Who are the community members served through this project? What age and/or ethnic groups are you trying to reach? Which neighborhood or community is this project intended to benefit? **(Max 500 characters)**

35. HOW WILL YOUR PROJECT IMPACT THE COMMUNITY? Explain how your project will enhance, involve, serve, and/or impact the community(ies) described above. **(Max 1200 characters)**

36. HOW WILL YOUR PROJECT BE PUBLICIZED? Be specific as to how and where you will publicize/advertise your project. What media format(s) will you use (i.e. print, radio, TV, postcards, mailings, flyers, posters, e-mail, BAC's Cultural Calendar, etc.) **(Max 1200 characters)**

37. IF YOU ARE APPLYING AS AN ORGANIZATION, CLEARLY STATE YOUR ORGANIZATION'S MISSION: Organizations, please enter your mission statement as it is written in your bylaws. You may also state how your proposed project upholds your organization's mission. **Individuals should type 'NA'.** **(Max 500 characters)**

38. WHAT PREVIOUS EXPERIENCE DO YOU HAVE CARRYING OUT SIMILAR PROJECTS? Discuss any previous experience you or your organization may have had with similar projects (include programs, flyers, press clippings, etc. in your supplementary materials). Give a brief account of your artistic history, past achievements and experience as it relates to your proposed project. Your answer to this question will help panelists determine your ability to administer all phases of the project. **(Maximum 1500 characters)**

39. BRIEFLY DISCUSS YOUR CURRENT ACTIVITIES AND FUTURE GOALS: Discuss any pertinent organizational or personal activities and your goals/plans for the future. **(Maximum 1500 characters)**

40. PROJECT ACCESSIBILITY: Have you considered making your project accessible to individuals with disabilities? Does the proposed project location facility have an elevator or ramp? Can programs be written in large type? Can you hire an interpreter for the deaf if needed? If your project is accessible to individuals with disabilities, how will you inform the public? **(Max 200 characters)**

41. IF LESS THAN THE REQUESTED AMOUNT IS RECEIVED FROM BAC, WILL YOUR PROJECT STILL OCCUR? IF YES, DESCRIBE YOUR CONTINGENCY PLAN: Briefly describe your plans to decrease expenses or seek additional funding if you do not receive the full amount you request. If your project cannot occur without full funding, please state so here. Please be aware that very few BAC Regrant applications are fully funded. **(Max 500 characters)**