Submit Grant Application to:

Jordan Gribble jordang@artscouncilswla.org

by **5 p.m. on Friday, March 4, 2022**.

**Grant # CPPJ-22/23-**

(Arts & Humanities Council official use only)

CPPJ FY 2022-2023

Project Assistance

Grant Application

Grant Activity Period: **April 1, 2022 – March 31, 2023**

Calcasieu Parish Police Jury Grant





**APPLICATION DEADLINE:** **Completed applications must be submitted via email to** [**jordang@artscouncilswla.org**](mailto:jordang@artscouncilswla.org) **by 5:00 p.m. on Friday, March 4, 2022 or the application is ineligible.** Applications **MUST** be typed on an official application form. Handwritten applications are ineligible. Applications may not be submitted via fax. Please read the **CPPJ FY 2022-2023 Guidelines** carefully before completing this application. Applicants are encouraged to contact the Community Development Coordinator, Jordan Gribble, for assistance **PRIOR** to the application deadline. The guidelines are available online at **www.artscouncilswla.org. Projects occurring outside of Calcasieu Parish are ineligible for funding.**

**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

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| **1. Amount Requested** (*from page 11, line 40 in this application*) | |  |
| **2. Total Project Expenses** (*from page 11, line 57 in this application*) | |  |
| **3. Project Title:** |  | |

**4. Project Description** (ONE sentence that summarizes the major activity of the project assistance request, including the artistic discipline and audience):

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#### THE APPLICANT

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| **5. Check here if a fiscal agent is being used:** | | | | | | | | | | | | | If checked, complete question 12 and 13 in the Sub-Applicant section of the application, page 2. | | | | | | | | | | | | | | |
| **6. Organization Name** | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Address | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | |  | | | | | | | | | | State | | | | **LOUISIANA** | | | Zip | | | | | |  | | |
| Parish | | **CALCASIEU** | | | | | | | | | | **Phone** | | | |  | | | **Fax** | | | | | |  | | |
| Website | |  | | | | | | | | | | **E-mail** | | | |  | | | | | | | | | | | |
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| **6a. Primary Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| *If different than above.* | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| |  |  | | --- | --- | | Address |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | City |  |  | **LOUISIANA** | Zip |  | | | | | | | | | **State** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**ZIP** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | |
| **Phone** |  | | | | | | | | **E-mail** |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **7. Federal Employer Tax ID# of Applicant** (**REQUIRED**) | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **8. Legislative and congressional district numbers** **of applicant.** Districts are available from your local registrar of voters, clerk of court, or on-line at <https://www.legis.la.gov/legis/FindMyLegislators.aspx>   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | House District # |  | Louisiana Senate District # |  | **US Congressional District #** | \_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **9. Project Director** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| *If different than above:* | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| City | | |  | | | | | | | | State | | | | **LOUISIANA** | | | | | Zip | | | |  | | |
| **Phone (day)** | | | |  | | | | | | | **Fax** | | |  | | | | | | | | | | | | |
| **E-mail** | | |  | | | | | | | | | | | | | | | | | | | | | | | |
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| **10. Has your organization ever received a Calcasieu Parish Police Jury grant?** | | | | | | | | | | | | | | | | | | | | | | YES | | | | NO |
| If yes, indicate  the last 3 grant  awards: | | | | | **Year** | | |  | | | | | |  | | |  | | | |  | |  | | | |
|  | | | | | **Amount** | | |  | | | | | |  | | |  | | | |  | |  | | | |

**11. Mission statement of the applicant organization.** What is your mission statement as adopted by your board of directors? What are your goals and what is the focus of your programming?

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##### THE SUB-APPLICANT

##### (COMPLETED BY ORGANIZATIONS/INDIVIDUALS USING A FISCAL AGENT ONLY)

An organization or an individual lacking the legal status to be an applicant must make arrangements for another organization to sign a grant application on its behalf and to pass on such grant funds for project implementation. The applicant organization acting on behalf of the sub-applicant is referred to as the “fiscal agent.” A charge for administrative services by the organization acting as fiscal agent (cost of personnel, time, supplies used in the administration of the funds for the funded project only) is allowable but must not exceed the lesser of 8% of the total grant request or $150. Applicant/fiscal agents and sub-applicants must be domiciled in the same parish. Please note that in such cases, the fiscal agent is the applicant and remains the legally responsible party for the use of the grant funds. Note: Representatives of the applicant/fiscal agent organization must sign lines 59 and 60 as Authorizing Official and Chief Fiscal Officer.

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| 12. Sub-applicant Name |  | | | | |
| **Address** |  | | | | |
| **City** |  | State |  | Zip |  |
| **Parish** |  | | | | |

*Note: Sub-Applicant and Fiscal Agent Applicant must be domiciled in the same parish.*

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| Contact |  | **Title** |  |
| Phone |  | **E-mail** |  |

13. Briefly describe the Sub-Applicant. If an organization, describe the organization’s mission and services it provides. If an individual, state your qualifications in the arts and describe your specific experience. Describe the relationship between the fiscal agent and the organization or individual.

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**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

**THE PROJECT**

**14. Proposed Activities.** **List** (no narrative) the **number or length of activities** and the **actual dates and locations** on which events, programs, concerts, exhibitions, or activities will occur – not a range of dates. ***Note:*** *These activities should be described in detail as a part of the narrative section – Planning and Design – and in the Provider of Service forms.*

**Activity dates must be within the grant activity period of April 1, 2022 – March 31, 2023**

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| **15. Partial Funding.** In the event of partial funding, how will the project be modified? | | | | | | |
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| 16. Artists | | | | | |
| Number of professional artists paid through this project: | | | | |  |
| Total number of artists to benefit from this project (include number paid): | | | | |  |
| 17. Individuals to Benefit | | | | | |
| Number of individuals participating  (i.e. actively involved with hands-on activities, master classes, etc.): | | | | |  |
| Number of individuals in the audience: | | | | |  |
|  | | | | |  |
| **18. Total Number of Individuals to Benefit** | | | | |  |
| Number of youth to benefit from above figure: | | | | |  |
| **19. Primary Target Audience. CHECK ONE:** | | | | | | |
| General  Audience | Ages 3-18/  Students PreK-12 | College  Students | Special  Population: |  | | |

**20. Artistic Discipline.** Check the **primary** artistic discipline(s) involved with the implementation of this project.

**Dance Folklife Media Arts Visual Arts & Crafts**

Ballet  Folk/Traditional Dance  Film  Painting

Ethnic/Jazz  Folk/Traditional Music  Audio  Sculpture

Contemporary  Folk/Traditional Crafts  Video  Drawing

and Visual Arts  Screenplay Writing  Photography

**Design**  Folk/Traditional  Technology/  Printmaking

Architecture Occupational Crafts Experimental  Public Art

Fashion Design  Oral Traditions  Clay

Graphic **Music**  Fiber

Industrial **Theatre**  Band  Glass

Interior  Musical Theater  Chamber  Leather

Landscape Architecture  Theater, General  Choral  Wood

Urban/Metropolitan  Mime  Ethnic  Mixed Media

Puppetry  Jazz  Metal

**Literature**  Young Audiences  Popular

Fiction  Storytelling  Soloist Recital

Nonfiction  Playwriting  Orchestral

Poetry  Opera

**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

**THE NARRATIVE**

Answer each question in the space provided. Be specific! Your application will be evaluated on the clarity of the information presented in the proposal. **Please read the evaluation criteria before answering the narrative questions.**

**Please:**

* **DO NOT type in font smaller than 12 point**
* **DO NOT bold your text**
* **DO NOT use any font that is difficult to read**

**Artistic Merit: Weight 35%**

Your application will be reviewed on the basis of:

* Artistic merit of the proposed project;
* Expertise of artists involved as providers of service;
* Contribution to the art form or the understanding and appreciation of the

art form(s) proposed.

*Note: Sample works of art included in the supplemental materials are strongly encouraged for artists involved in the project.*

**Need and Impact: Weight 30%**

Your application will be reviewed on the basis of:

* Need for the project in the community;
* Merit of the project’s purpose and objectives according to community standards;
* Efforts for increased access, participation, and exposure to the arts;
* Involvement of diverse (social, geographic, economic) populations reflective of

the community, including those with limited access to the arts;

* Level of community collaboration or involvement.

**Planning and Design: Weight 20%**

Your application will be reviewed on the basis of:

* Well-planned and designed project;
* Adequate people and resources specified;
* Realistic time frame as proposed;
* Involvement of target audience in the planning process.

**Administration and Budget: Weight 15%**

Your application will be reviewed on the basis of:

* Ability of applicant to administer and deliver activities proposed;
* Appropriate request level and use of grant funds;
* Clarity and completeness of financial information;
* Compliance with past grant contracts, if applicable.
* Project costs compared to need and impact and/or numbers served.

**Bonus Points:**

Bonus points will be determined by the Community Development Coordinator prior to the review, and

disclosed to the panel at the time of the panel review.

Project co-sponsored by one (1) non-profit organization (in addition to applicant) **\_\_\_\_\_\_\_\_\_/ 5 pts**

Project co-sponsored by two (2) non-profit organizations (in addition to applicant) **\_\_\_\_\_\_\_\_\_/10 pts**

Project with matching funds equaling 50% or more of total amount requested **\_\_\_\_\_\_\_\_\_/ 5 pts**

**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

**21. NARRATIVE QUESTIONS**

**Read all questions before beginning.** Please answer the narrative questions, **using only the pages provided,** according to the evaluation criteria on page 4. Use 12-point easy-to-read font. **Be specific –** your application will be evaluated on the clarity of the information presented.

**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed space provided. Please edit your response to fit within the box.**

**ARTISTIC MERIT: 35%**

1. **Describe the project for which you are seeking funding.** Who are the artists involved in the project? How will this project expand the public’s understanding of the featured art form(s)? Use this space to describe the artistic merit of the project, details of the project’s purpose and goals, etc.

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**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

##### NEED AND IMPACT: 30%

##### Describe the need for the project in the community. What do you want the project to accomplish for the community? How does this project relate to your organization’s mission statement? Use this space to describe short and long-range goals for this project, how this project meets the needs of the community, the extent of the public’s engagement in the project, etc.

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1. **Who is your target audience?** Address efforts to increase access, participation, knowledge, and/or exposure to the arts, particularly the involvement of diverse (social, geographic, economic) populations, including those with limited access to the arts.

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**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

**PLANNING AND DESIGN: 20%**

1. **Describe how staff, volunteers, and/or the community is involved with the planning, design, and funding of the project.** Use this space to describe the methods of carrying out this project, including details of the project’s logistics, event timeline, etc. Include any in-kind support and partnerships this project has received. If you are partnering with 1 or more local non-profit agencies, define the role they will play in the project, and provide a contact person’s name and information.

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1. **How will you promote or endorse the project to the public?** Describe your marketing and promotional plan or how you plan to increase the public’s awareness of the program. Include details on any planned print ads, online listings, radio/TV promotions, etc.

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**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

**ADMINISTRATION AND BUDGET: 15%**

1. **Describe the management of the project and how grant funds will be used.** Use this space to describe who will be responsible for the implementation of the project and what his/her relationship to the applicant is. If you are receiving matching funds, please list the source in the narrative. If you are seeking funds for the payment of a venue, include venue information. **Be specific on exactly how grant funds will be used in the project, including an overview of expected expenses and revenue of the project.**

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1. **What is your method of evaluating and/or assessing this project?**

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**IMPORTANT NOTE: If the box you are typing in shifts to the next page, you have exceeded the allowed spaced provided. Please edit your response to fit within the box on the same page!!**

**PROVIDER OF SERVICES**

**THE PROVIDER OF SERVICES CANNOT BE SUBSTITUTED BY A RESUME OR INFORMATION CONTAINED IN ATTACHMENTS**. **You may, however, electronically *include* a complete resume, brochures, and/or video, slides, or other samples of work for the provider as supplemental to the application.**

* Must be completed for paid or not paid Project Director.
* Must be completed for **all** artists, artistic personnel, or other individuals directly involved with the implementation and production of the proposed project.
* Use a separate copy of this form for each person or group. If more than one of these forms is needed, photocopy it.

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| **22. Person or Group to Provide Service:** | |  | | | | | | | | | | | | | | |
| Address |  | | | | | | | | | | | | | | | |
| City |  | | State | | | |  | | | | | | Zip | |  | |
| Phone |  | | Email | | | |  | | | | | | | | | |
| **23. Number/Length of Activities to be Provided:** | | | | | |  | | | | | | | | | | |
| **24. Professional Fee:** | | | | | |  | | Per |  | | | (Hour, Session, Activity, etc.) | | | | |
| **25. Travel Costs/Per Diem/Lodging:** | | | | | |  | |  | | | | | | | |  |
| **Total Fee for Service** | | | | | |  | | ***Check here if fee is all-inclusive*** | | | | | | | |  |
|  | | | |  |  | | | | |  |  | | |  | |  |
| **26. How is this professional fee paid for?**  **Check all that apply:** | | | |  | CPPJ GRANT AWARD | | | | |  | APPLICANT’SCASH | | |  | | IN-KIND SUPPORT |
| **Breakdown of payment towards this fee:** | | | | $ |  | | | | | $ |  | | | $ | |  |

**27. Brief Bio and Qualifications**

**Describe the qualifications, including education and training, and related work experience for the individuals or**

**organizations hired for this project.** Keep in mind why this person or organization should be hired for your project;

part of the evaluation of your grant application will be based on the quality of the professionals involved.

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**28. Description of Services**

**Briefly detail the services to be provided**. This information should relate to Question #14 (Proposed Activities) on

page 3 of this application.

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**THE PROJECT BUDGET DIRECTIONS AND DEFINITIONS**

**Directions for Completing the Project Budget:**

* **DO NOT** round all dollar amounts to the nearest $1.
* Include **all cash** Revenue and Expenses for the grant as it pertains to the project.
* All in-kind or donated services should be included under In-Kind Support and not in the Cash Budget.
* List the source of revenue where indicated.
* All columns and rows should total correctly.
* All donated revenue and expenses for this project should be included under In-Kind Support and not in the Cash Budget.
* The Grant Request on *Line 40* must equal Total Expenses on *Line 57* under the Grant column.
* The Grant Request on *Line 40* must equal *Question 1* on page 1.
* If using *Line 45*, you must complete *Questions 12* *and 13* on page 2 of this application for the sub-applicant.
* You may also attach a more detailed budget, although it does not substitute for the information on the Project Budget. This information will be forwarded to the panel with the application budget.
* While a match (cash and/or in-kind) is not required under this program, it is encouraged and will be considered by the community review panel in their evaluations.

**Revenue:**

* **Admissions, Memberships, Subscriptions** refers to income earned as a result of the project you are applying for, such as individual ticket sales, price charged for involvement, etc.
* **Contracted Services Revenues** refers to income earned from services your agency offers on a contract for services basis, such as touring, school performance, etc.
* **Other Applicant Cash** refers to agency cash on hand that will be used towards the project you are applying for. The applicant will provide cash that is not earned as a part of this project.
* **Corporate Support** refers to cash contributed by local, national or international businesses that will be used towards the project you are applying for.
* **Foundation Support** refers to support provided by local or national foundations.
* **Fundraising** refers to any solicitation for donations or contributions from individuals in support of this project.
* **Federal, State, Regional** refers to government support contributed by the United States Government, State of Louisiana, or Parish government.
* **Local** refers to cash contributed by a local government or community group.
* **Calcasieu Parish Police Jury Grant Request** refers to the amount requested from the applicant organization for this project. This line should be broken down under the Grant Expenses column of the Project Budget to represent what items grant money will support, if funded.
* **Total Revenue** represents all cash income that will be used to administer the project.

**Expense:**

* **Personnel** refers to permanent employees of the organization who will be paid for his/her time as a part of this project.
* **Personnel – Administrative** – administrative employees receiving payments specifically identified with the project. Examples: executive and supervisory admin staff, program directors, bookkeepers, etc.
* **Personnel – Artistic** – artistic employees receiving payments specifically identified with the project. Examples: artistic directors, curators, composers, painters, poets, teachers, etc.
* **Personnel – Tech/Production** – employees receiving payments specifically identified with the project for technical management and staff services. Examples: technical directors, wardrobe, exhibit preparers, stage managers, etc.
* **Fiscal Agent** **Fees** are defined as fees charged by an organization to act as the applicant for another organization and are intended to offset the cost of personnel, time, and supplies. Fiscal agent fees should not exceed either $150 or 8% of the total project costs – whichever figure is less.
* **Outside Professional Services – Artistic** refers to artistic services by firms or people not considered employees of the applicant (e.g., individual artists, folklorist, curator, etc. whose services are contracted for the project). A provider of services form is required for anyone listed under this category.
* **Outside Professional Services – Other** refers to non-artistic services by firms or people not considered employees of the applicant (e.g., project director, consultants, technical director, publisher, etc.). A provider of services form is required for anyone listed under this category.
* **Utilities** refer to costs associated with telephone, gas and electric, water, etc.
* **Space Rental** refers to the cost to rent a facility, exhibit or performance venue.
* **Travel/Per Diems** refers to the cost of travel for outside professional services, per diems, and travel for services outside the area.
* **Marketing** **Costs** refers to the cost associated with advertising, soliciting involvement, or promoting the project and includes design, printing, advertising, flyers, playbills, tickets, etc.
* **Rental Equipment** refers to the costs associated with renting equipment for the purpose of producing the project.
* **Supplies and Materials** refer to the cost of items that are needed to produce or create the project, such as fabric, paints, disposable cameras, paper, etc. If supplies and materials exceed $500, you must submit a detailed breakdown of costs.
* **Postage/Shipping Costs** refers to the cost for mailing and shipping related to the project.
* **Insurance** refers to the cost of liability insurance related to the project.
* **Other** refers to expenses not listed under any other expense category. List all expenses under Other.
* **Total Expenses** represents all cash costs involved to administer the project being proposed.

**In-kind Support: (budget on page 11)**

* **In-kind** refers to donated personnel and volunteer time, materials, and services associated with the project.
* **Source** is either an organization contributing materials, facilities, services, etc. for the project or an individual contributing volunteer time.
* **Contribution** is the item being donated, such as a facility space or for individuals, the number of hours.
* **Cash Equivalent** is the amount the applicant would pay in cash for items, services or time listed.

##### DO NOT round to the nearest dollar. Use dollars and cents.

##### TOTAL PROJECT BUDGET AND GRANT REQUEST

See directions for completing the project budget on page 10 before completing lines 29 through 57.

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| **REVENUE** | | | **CASH** |
| 29. Admissions, Memberships, Subscriptions | | |  |
| 30. Contracted Services (workshops, packaged presentations, etc.) | | |  |
| 31. Other Applicant Cash: *List Source* |  |  |  |
| 32. Corporate Support: *List Source* |  |  |  |
| 33. Foundation Support: *List Source* |  |  |  |
| 34. Fundraising | | |  |
| 35. Federal: *List Source* |  |  |  |
| 36. State: *List Source* |  |  |  |
| 37. Regional: *List Source* |  |  |  |
| 38. Local: *List Source* |  |  |  |
| **39. Sub-Total** | | |  |
| **40. Calcasieu Parish Police Jury Grant Request** | | |  |
| **41. Total Revenue** | | |  |

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| **EXPENSES** | | | **GRANT** |  | **CASH** |  | **TOTAL** |
| 42. Personnel – Administrative | | |  |  |  |  |  |
| 43. Personnel – Artistic | | |  |  |  |  |  |
| 44. Personnel – Tech/Production | | |  |  |  |  |  |
| 45. Fiscal Agent Fees | | |  |  |  |  |  |
| 46. Outside Professional Services – Artistic | | |  |  |  |  |  |
| 47. Outside Professional Services – Other | | |  |  |  |  |  |
| 48. Utilities\* | | |  |  |  |  |  |
| 49. Space Rental | | |  |  |  |  |  |
| 50. Travel/Per Diems | | |  |  |  |  |  |
| 51. Marketing Costs (promotion, print) | | |  |  |  |  |  |
| 52. Rental Equipment | | |  |  |  |  |  |
| 53. Supplies and Materials\* | | |  |  |  |  |  |
| 54. Postage/Shipping Costs | | |  |  |  |  |  |
| 55. Insurance\* | | |  |  |  |  |  |
| 56. Other: *List* | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **57. Total Expenses** | | |  |  |  |  |  |

**\*Line 48, Utilities: Only project-related utilities may be claimed as expenses. Supporting documentation must be provided in final report.**

**\*Line 53, Supplies and Materials: If supplies and materials exceed $500, a detailed breakdown must accompany this application.**

**\*Line 55, Insurance: Only project-related insurance expenses may be claimed. Supporting documentation must be provided in final report.**

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| **58. In-Kind Support for Proposed Project.** In the space below, list the budget category or source of the donation/contribution, type the donation/contribution and the value of the in-kind donations or volunteer support. You may continue an additional sheet of paper if necessary. The national value for one volunteer hour is $22.55.  *For example: Source: ABC Printing, Inc. Marketing: Flyers and Street Banners. Cash Equivalent: $575.00. The ABC Printing company is donating the materials for flyers that will be used in a mailing and street banners that will hang above main street the day of the event.* | | | | |
| **Source (List Budget Category or Company)** |  | **Contribution (Item or Hours)** |  | **Cash Equivalent** |
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| **TOTAL IN-KIND SUPPORT:** | | |  | **$** |

**ATTACHMENTS**

Attach an IRS letter determining nonprofit tax exemption under section 501(c)(3) of the Federal Tax Code. Governmental subdivisions (public schools, parish libraries, municipal governments, state universities, etc.) are not required to submit proof of nonprofit status.

For organizations lacking nonprofit tax exemption from the IRS, attach a Certificate of Incorporation from the Louisiana Secretary of State, Commercial Division indicating nonprofit status and city/parish of domicile, if not already on file.

Attach a board of directors listing that includes names and addresses, identifying officers, ethnicity, and professional affiliation. Governmental subdivisions (public schools, parish libraries, municipal governments, state universities, etc.) are not required to submit board of director verification.

Proof from the Louisiana Secretary of State website showing your organization is in good standing for filing the proper annual report.

**Original typewritten, application form with complete narrative, provider of services, project budget, and required attachments**;

Schools or projects working with schools must attach a letter of support from the local school board and/or principal.

Applications requesting the creation of a **new** work in the performing arts, art in public places/public art, design, or media production (film, video, or radio) must submit a sample of work that illustrates artistic merit of artists involved.

***Optional***, but recommended: **Include electronic copies of supplemental materials, no more than 10 pages, with each application.**

**CHECK LIST**

Project occurs between April 1, 2022 and March 31, 2023;

Amount requested does not exceed maximum allowable request ($5,000);

A copy of your year-end financial statements or a copy of your most recently completed audit;

Original form with complete narrative, provider of services, project budget, and required attachments;

Samples of work (for applications requesting funds for creation of a new work);

Appropriate \*signatures signed in **BLUE INK** below;

\*Note: Electronic signatures will also be accepted this year.

Keep a copy of the completed application form for your records;

Application received via email by **5:00 p.m.** on or before **March 4, 2022.**

##### ASSURANCES

The applicant hereby gives assurances to the Calcasieu Parish Police Jury and the of SWLA that: the applicant has read and understands all information contained in the FY 2021-2022 Calcasieu Parish Police Jury Grant Program Guidelines; the activities and services proposed in this application will be administered by the applicant organization; and any grant funds received for this application will be used exclusively for payment of allowable expenditures incurred for proposed services, and such grant funds will be administered by the applicant. The applicant will comply with all rules, regulations, laws, terms, and conditions described in the FY 2021-2022. Calcasieu Parish Police Jury Grant Guidelines. The undersigned have been duly authorized by the governing authority of the applying organization to submit this application to The Arts and Humanities Council of Southwest Louisiana and as authorized by the Calcasieu Parish Police Jury. We hereby certify that all figures, statements, and representations made in this application, including any attachments, are true and correct to the best of our knowledge.

Signatures are required and indicate that the signers have read the above “ASSURANCES” and agree to the grant conditions. “Authorizing Official” should be the president of the board or other individual with the authority to enter into a legal contract on behalf of the agency (in the event of an application from a school or school system, a duly authorized representative on behalf of the parish school board or private/parochial school board). “Chief Fiscal Officer” should be the individual immediately responsible for the disbursement of funds for the project. “Project Director” is the individual who will be directly responsible for the implementation of the activities of the above-described project. The application with the signatures constitutes a legal document. **Signatures MUST be the original signatures in blue ink OR proper electronic signatures and all three spaces must be filled in.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 59. **Authorizing Official** (usually the president or chairman) | | | | | |
| Signature |  | | Date |  | |
| Typed Name | |  | Title |  | |
| Phone (day) | |  | Phone (other) | |  |

60. **Chief Fiscal Officer** (may be same as Authorizing Official, usually the Treasurer)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signature |  | | Date |  | |
| Typed Name | |  | Title |  | |
| Phone (day) | |  | Phone (other) | |  |

61. **Project Director**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signature |  | | Date |  | |
| Typed Name | |  | Title |  | |
| Phone (day) | |  | Phone (other) | |  |

**Please check your final application package carefully. Incomplete applications may not be funded.**

**Grant Review Panel: Wednesday, March 9, 2022, 10 a.m., likely to be held virtually. \*Subject to change.**