

Tri County Arts Council
Individual Artist Project Application 2010

Deadline: Postmarked by October 28, 2009
Send to: 108 Union Street, Cobleskill, NY 12043



A. BACKGROUND:

Applicant's Legal Name: _____

Street Address: _____

City: _____ Zip: _____ County: _____

Day Phone: _____ Eve. Phone: _____ Fax: _____

E-Mail: _____ Web Site: _____

NYS Assembly District: _____ NYS Senate District: _____ U S Congressional District: _____

(www.nysegov.com/map-ny.cfm for above district numbers)

Have you ever applied directly to NYSCA? _____ If yes, in what year? _____

Have you applied for an Individual Artist Project Grant within the past 3 years? **Y** **N**

If **Yes**, did you receive funding? **Y** **N**

B. PROJECT INFORMATION:

Project Title: _____

Required: Please summarize your project in *50 words or less*. Note: This will be the description used by the Tri County Arts Council to identify and publicize your project.

Project Start Date: _____ Project End Date: _____

Total Project Expense: \$ _____ 2010 IAP Grant Amount Requested: _____

Which **Arts Discipline** best describes the project? _____

Date of Seminar attended or meeting with Tri County Arts Council Staff: _____

Print Name: _____

ARTIST'S SIGNATURE _____ **DATE** _____

C. Narrative and Budget Section:

Please submit your typed responses to each of the following questions. Do not use a font smaller than 12 point. Proposals should be no longer than 3 pages. Please repeat the heading that appears for each question. For example, 1) Project Title.

1. PROJECT TITLE
2. PROJECT SUMMARY (50 words or less)
3. GOALS AND OBJECTIVES (What do you plan to achieve and how will you achieve it?)
4. DESCRIPTION OF YOUR PROPOSED PROJECT: Include major activities associated with the project such as number of events, location, length of time and dates or other appropriate details
5. PLAN TO ENGAGE THE COMMUNITY (Community setting, involvement and/or interaction)
6. BUDGET: Round figures off to nearest \$10. (See guidelines for sample budget)

D. Supplementary Materials (Please include the following with your application packet):

- 1 original signed application form including all attachments
- 3 photocopies of application form
- Letters of support for community engagement
- Permits (where required)
- Artist resume
- Labeled artistic sample (All materials will be held at the TriCounty Arts Council office.) Please cue VHS and audio tapes; indicate the track for DVD's and CD's. The panel will view or listen to up to 3 minutes.

Application to be postmarked by October 28, 2009

Submitted to:

The TriCounty Arts Council

108 Union Street

Cobleskill, NY 12043

518-254-0611

www.tricountyarts.org "contact us"