



## Arts Education Grant

The Arts Education Grant program is a local re-grant program of the Roxbury Arts Group. These grants are made possible with funds from the Decentralization (DEC) program of the New York State Council on the Arts (NYSCA).

The following guidelines are an abbreviated version of the complete guidelines that can be found on the Roxbury Arts Group Website: <http://roxburyartsgroup.org/artlinx/decentralization-grants/>

All applicants **MUST** attend a grant informational meeting being held throughout the county. If you are unable to attend a meeting please contact Annie Schwed, Grants and Community Coordinator, at 607.326.7908, or by email at [annie@roxburyartsgroup.org](mailto:annie@roxburyartsgroup.org)

|           |                              |   |
|-----------|------------------------------|---|
| Wednesday | August 2, 2017<br>5:00 p.m.  | Roxbury Arts Group<br>5025 Vega Mtn Road, Roxbury, NY<br>(607) 326-7908         |
| Thursday  | August 3, 2017<br>2:30 p.m.  | Franklin Free Library<br>334 Main St, Franklin, NY<br>(607) 829-2941            |
| Saturday  | August 5, 2017<br>12:00 p.m. | Stamford Village Library<br>117 Main St, Stamford, NY<br>(607) 652-5001         |
| Wednesday | August 9, 2017<br>2:30 p.m.  | William B Ogden Free Library<br>42 Gardiner Place, Walton, NY<br>(607) 865-5929 |
| Friday    | August 11, 2017<br>5:30 p.m. | Bushel Collective<br>84 Main St, Delhi, NY                                      |
| Tuesday   | August 15, 2017<br>4:00 p.m. | Andes Public Library<br>242 Main St, Andes, NY<br>(845) 676-3333                |

The following application must be complete and submitted by **4 pm, Friday, October 27, 2017** to be considered for funding. If you would like staff to review a draft of your request, you may schedule a meeting either in person or by phone. Reviewing an applicant's draft proposal is for the purpose of providing technical assistance and does not guarantee that it will receive funding. Drafts must be submitted prior to meeting with Roxbury Arts Group staff. The deadline for submitting a draft for review is two weeks prior to the application deadline (Friday, October 13, 2017).

For technical assistance in using Submittable or uploading forms, please contact Submittable directly, through the link at the bottom of the form or through the pop-up window that appears.

Attachments:

Please download the following:

Budget Sheet- <http://roxburyartsgroup.org/wp-content/uploads/2013/06/Arts-Ed-Budget.xlsx>

Be aware that you will need to upload additional information for this application. Read through the entire application or guidelines to find required materials.

If you need additional information, please contact Annie Schwed, Grants and Community Coordinator, at 607.326.7908, or by email at [annie@roxburyartsgroup.org](mailto:annie@roxburyartsgroup.org).

Each time you work on an application, you can save it as a draft for 21 days. During that time, you may return to work on your entry before the deadline by signing in to Submittable. The 21 day time frame is renewed each time you work on the application. Upon your final submission, you will receive a confirmation email, with a link where you will be able to view your submission. Once submitted, you will not be able to make changes to your document. If there is a major issue or change in your submitted materials, please contact the Roxbury Arts Group directly.

Project Title \*  
Applicant \* (Choose One)

Artist, Non-profit Organization

I am applying for: \* (Choose one.)

K-12 In-School Grant, After School Grant, Community-based Learning Grant

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NYS Assembly District \* (Follow this link to find your districts:

<http://www.elections.ny.gov/district-map/district-map.html>)

NYS Senate District \*

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ARTIST/ORGANIZATION INFORMATION:

Applicant Organization Name (Required for non-profits.)

Nonprofit Status \* (Please choose one, if you are an organization. If you are an artist, please choose: N/A, Artist)

- NP Dept of State
- NP Dept of Education
- Other
- Unit of Gov't/Indian Tribe
- N/A Artist

Non-Profit Year of Incorporation (Required for non-profits.)

Non-Profit Fiscal Year End (Required for non-profits.)

Have you ever applied directly to NYSCA? \* (If yes please answer the next question.)

In what years did you apply for direct NYSCA funding?

Remember to save your draft!

Scroll to the bottom of the page and click "Save Draft"

Contact person- Name/Title \* (If you are an artist applying, please give your information for the following questions. If you are a non-profit applicant, fill this section out for your organization.)

Mailing Address \*

City, State, Zip Code \*

Day Phone \*

Evening Phone \*

Email Address \*

Website

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**ARTIST PARTNER INFORMATION:**

(This section is to be filled out by the applicant organization for their partnering artist. If you are an artist applying for this grant, you should have answered this information above and you can skip this section.)

Name  
Mailing Address  
City, State, Zip  
Day Phone  
Evening Phone  
E-mail Address  
Website

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**SCHOOL / PARTNER INFORMATION:** (To be filled out if you are working with a school or organization, different from the applicant.)

School or Partner Organization  
Principal or Director  
Participating Teacher and Subject (If applicable)  
Mailing Address  
City, State, Zip  
Day Phone  
Evening Phone  
E-mail Address  
Website

Remember to save your draft!  
Scroll to the bottom of the page and click "Save Draft"

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**PROJECT INFORMATION:**

Provide a one sentence description of your Project \* (Ex. Artist Joan Miller will utilize art to teach and reinforce mathematic concepts during her sessions at Madeup Central School during the month of May. For more information, email [joan@email.com](mailto:joan@email.com).)

Total Project Expense \*  
Project Start Date \*  
Project End Date \*  
# of Artists participating in Project \*  
Grant Amount Requested \* (Please be sure this number matches the Grant Request on your budget)  
# of Community Members served \* (This number is an estimate. If this is a recurring event, please compare to last years' numbers.)  
  
# of Youth under 19 to be served (Participants/Audience) \* (Same as above, this is an estimate.)  
  
Have you received an Arts Education Grant within the past three years? \*

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**PROJECT DESCRIPTION:**

Please answer the following questions to provide a complete and detailed description of your Project.

1. What artistic activities will occur? \* (Describe your Project and the artistic activities in the most complete yet concise manner possible.)

*Limit: 400 words*

2. What are the Project goals? \*

*Limit: 250 words*

3. What are the event dates and locations for the Project? If there are multiple dates, please list all. \*

*Limit: 250 words*

4. Describe how parents, the entire school, community members, and local government officials will be aware of, involved in, and benefit from the project, if applicable. \*

*Limit: 200 words*

5. Stated learning goals \*

*Limit: 300 words*

6. Anticipated outcomes and means for evaluation. \* (How will you show success?)

7. Provide a detailed timeline for the proposed project. \*

*Limit: 200 words*

9. Why is this Project needed in this Delaware County school/community? \*

*Limit: 250 words*

10. How are the key personnel qualified to execute this Project? \*

*Limit: 250 words*

11. How will you cope with unexpected changes that might occur, such as less funding, change in personnel, rainy weather? \*

*Limit: 200 words*

Remember to save your draft!  
Scroll to the bottom of the page and click "Save Draft"

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Budget \* Acceptable file types: pdf, doc, docx, xls, xlsx.  
(Upload the Excel Spreadsheet Provided in the guidelines above.)

What specifically will you use DEC funds to pay for?

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Work Samples \* Acceptable file types: pdf, doc, docx, jpg, gif, mp3.  
(Upload the following:

Visual Artists: 8-10 images.

Literary: Submit an example of artist's original writing, not to exceed eight (8) pages.

Music: Submit a work sample(s), totaling up to 5 minutes long. You may include up to three (3) samples to show contrast.

Dance, Theater, or Film: Please contact Roxbury Arts Group for directions on submitting video.

ALL SUBMISSIONS should include a descriptive page that gives the title, size/length, medium (if applicable).

Select up to 11 files to attach.)

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Resumes \* Acceptable file types: pdf, doc, docx.  
(Submit a 1-2 page resume or brief biography for all the artists involved with the project,  
AND  
Submit a 1-2 page resume or brief biography of the primary project administrator involved with the Project.

Select up to 15 files to attach.)

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Organization Information Acceptable file types: pdf, doc, docx.  
(Please upload the following about the partnering/sponsoring organization (if applicable):

Organization's Mission Statement

List of Board of Directors (including addresses)

Financial Statement for the last completed fiscal year. This could be a Treasurer's Report or a copy of the IRS 990 Form. Please do not submit a bank statement.

Select up to 5 files to attach.)

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Letter of Agreement \* Acceptable file types: pdf, doc, docx.

(This letter is between the partnering cultural organization (if applicable), school partner, and participating artist(s). This letter should detail the roles, responsibilities, and expectations of each member of this partnership, and should be printed on the school/organization letterhead.)

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Proof of Non-Profit Status Acceptable file types: pdf, doc, docx.

(Acceptable documents include:

1. IRS tax exempt letter 501(c)(3)
2. Letter from NYS Board of Regents Charter, section 216 of the Education Law
3. Current NYS Bureau of Charities (Office of the Attorney General) Filing receipt
4. Letter of Incorporation under section 402, Not-for-Profit Law

NOTE: A NYS Tax Exempt Certificate from Dept of Taxation and Finance is NOT considered proof of non-profit status.

Select up to 2 files to attach.)

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Other Supporting Materials Acceptable file types: pdf, doc, docx, jpg, mp3, wma.

(Please be selective about additional supporting materials you would like the review panel to consider when reviewing your application.

Select up to 15 files to attach.)

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#### Certification

The undersigned certifies that he/she (1) is an authorized signatory on behalf of the organization; (2) has knowledge of the information presented herein; (3) has read and understood the guidelines of the Roxbury Arts Group Community Arts Grant Program and complies with and is made subject to said guidelines; (4) releases RAG, its employees and agents with respect to damages to property or materials submitted with this application and (5) that this applicant is not currently under consideration for NYSCA funding.

Authorized Name/Title \*

Almost finished!

Click on the Submit button below to finalize your application to Roxbury Arts Group. Once submitted, you will receive a confirmation email with a link to your submission. You will be able to download your entire submission for your files at that point. NOTE that if you are redirected back to this page, make sure that you have entered text in and/or checked off all required fields/boxes. All items marked with an asterisk (\*) are required before the submission will be able to be completed.

This form will autosave