

Organization:  
Artist:  
eGRANT Application ID:



## **Applicant and Project Information**

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### **Applicant Information**

**Legal Name of Presenting Organization**

**Alternate Name (if applicable)**

**Mailing Address of Presenting Organization**

**City**

**State**

**Zip**

**Telephone**

**Contact Person Name**

**Contact Title**

**Contact Telephone**

**E-mail**

**Web Site**

**Year Incorporated**

**Federal Employer ID**

**D-U-N-S #**

**If applicable, uploaded file name of letter confirming unit of state or local government status.**

**Answer questions about your organization below. If part of a larger organization, college, or university, list the appropriate departmental or total public arts programming information only.**

**Total operating income (last completed fiscal year):**

**Total operating expenses (last completed fiscal year):**

**Total number of staff in your organization: Full time      Part time**

**Total number of staff in your programming department: Full time      Part time**

**Does your organization have an accumulated deficit?  Yes  No**

**If your organization has an annual operating deficit or accumulated deficit, use the space below to state the size of the deficit and how your organization plans to rectify it. Also explain any significant fluctuations in your annual budget from one year to the next (not to exceed 5 lines and 255 characters or approximately 40 words).**

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Were there any findings in your most recent financial or compliance audits relative to noncompliance with Federal statutes, regulations and terms and conditions of any grant awards?  Yes  No

If yes, please describe the actions that have been taken to address the findings? ( not to exceed 10 lines and 700 characters or approximately 100 words)

Is your organization required to complete a Single Audit as mandated by the Federal government?  
 Yes  No

**Project Information**

*The following information pertains only to the activities taking place in your community.*

Name of Artist/Ensemble

Name of Consortium Lead Presenter

Are you the Lead Presenter?  Yes  No

Your Project Start Date  
(First date of public performance or community engagement activity, whichever comes first)

Your Project End Date  
(Last date of public performance or community engagement activity, whichever comes last)

Number of days project activities are taking place within your community

Number of public performances in your community

Number of community engagement activities in your community

Signed Letter of Agreement File Name

The uploaded document is the final fully executed contract.

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### Presenter Programming Profile

Provide a list of the performing artists/ensembles your organization has presented over the past two seasons and is presenting in the current season. Do NOT include artists/ensembles that were rentals or were self-produced by the artists/ensembles. List no more than thirty (30) artists/ensembles per presenting year. **List one artist/ensemble per line. Include name of artist/ensemble ONLY.**

**We recognize the field-wide disruptions caused by COVID-19. Please do not list cancelled or postponed engagements that have not taken place.**

2018-2019 Season	2019-2020 Season	2020-2021 Season

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**[LEAD PRESENTER ONLY] Consortium Project Summary**

*The following information pertains to the consortium as a whole.*

**Legal Name of Lead Presenter Organization**

**List all Presenter Partners in this application**

(Please list one presenter per line, including organization name, city, and state)

**Total number of Presenters represented in this application (including Lead Presenter):**

**Name of Proposed Artist/Ensemble**

**Number of Artists in Ensemble**

**Artist Information**

*The following information should pertain to the Artist/Ensemble, not the Artist/Ensemble's representative/agent.*

**Artist/Ensemble Contact Person**

**Address**

**City**

**State**

**Postal Code**

**Country**

**Telephone**

**Email**

**Website**

**Representative/Agent (if applicable)**

**Agent Name**

**Agent Contact**

**Agent Address**

**City**

**State**

**Postal Code**

**Country**

**Telephone**

**Email**

**Website**

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**[LEAD PRESENTER ONLY] Artist/Ensemble Description**

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1. Provide a brief biography of the artist/ensemble, including information on key creative personnel (i.e., choreographer, composer, director, or artistic director), and instrumentation, in the case of music applicants. Make sure to highlight any records of notable achievements in recent years. (not to exceed 40 lines and 3400 characters or approximately 500 words).

SAMPLE

**[LEAD PRESENTER ONLY] Artist/Ensemble Description (continued)**

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**2. Describe the proposed work(s) to be performed, noting if any of the presenter partners will be showing different works at their venue. Include any information that helps illustrate the artist's practice and the ideas behind the work. (not to exceed 40 lines and 3400 characters or approximately 500 words).**

SAMPLE

**[LEAD PRESENTER ONLY] Work Sample Description**

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Organization:  
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**WORK SAMPLE #1**

**Work Sample URL:**

**Password (if applicable):**

**Title of work:**

**Date worked was completed (if work is a traditional piece, simply note as such):**

**Name of composer, choreographer, playwright or director (if work is a traditional piece, simply note as such):**

**Will this work be performed at one or more of the consortium engagements?**  Yes  No

**Brief description of work sample, including date of performance, name and location of performance venue, identification of principal artists, recording conditions (if applicable), and any background information that would be helpful for panelists to better understand the work represented on the sample (not to exceed 22 lines and 1700 characters or approximately 250 words).**

**WORK SAMPLE #2**

**Work Sample URL:**

**Password (if applicable):**

**Title of work:**

**Date worked was completed (if work is a traditional piece, simply note as such):**

**Name of composer, choreographer, playwright or director (if work is a traditional piece, simply note as such):**

**Will this work be performed at one or more of the consortium engagements?**  Yes  No

**Brief description of work sample, including date of performance, name and location of performance venue, identification of principal artists, recording conditions (if applicable), and any background information that would be helpful for panelists to better understand the work represented on the sample (not to exceed 22 lines and 1700 characters or approximately 250 words).**

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***The following information pertains only to your organization and the activities taking place in your community.***

- 1. How does this project align with your organization's mission, artistic goals, and programming history? Explain the ideas behind the artist's work and why you are bringing the work to your programming season this year. Additionally, describe your artist engagement approach and how you will work with the artist to realize the project's vision. (not to exceed 40 lines and 3400 characters or approximately 500 words).**

SAMPLE



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## Application Narrative (continued)

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- Briefly describe the public, educational, and other activities planned as part of this project. What community partnership and other strategies do you use to cultivate audiences? How do you address the barriers of participation in your community as an organization? (not to exceed 40 lines and 3400 characters or approximately 500 words).**

Note: Do not include specific information about the proposed activities such as engagement dates, types of venues, seating capacity, or projected attendance. This information will be gathered in the Presenter Activities Outline.

SAMPLE

## Project Activities Outline

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Please list, in chronological order, the proposed activities and performances planned as part this project.

- **Activity:** List each planned activity for your engagement, including public performances and community engagement activities. State the type of activity, such as public performance, master class, workshop, local radio or television appearance, etc. List each activity separately.
- **Community Partner(s):** Where applicable, provide the name of the educational or faith-based institution, library, cultural center, civic club or other partnering organization involved in the activity.
- **Date:** Provide dates for each activity being as specific as possible.
- **Target Audience:** Identify the primary targeted audience or participants for this activity (e.g., general public, K-12 students, higher education, seniors, youth, healthcare facility, specific community focus, etc.).
- **Projected Attendance:** Provide anticipated number of audience members or participants for this activity.
- **Facility:** Identify the type of facility and seating capacity.
- **Ticket/admission pricing:** Provide the estimated ticket/admission cost for the activity, or enter "free" for free events.

Activity:

Community Partner, if applicable:

Date:

Target Audience:

Projected Attendance:

Facility:

Seating capacity:

Estimated ticket/admission pricing, if applicable:

Will the proposed artist participate in this activity?  Yes  No

Is this activity in-person or virtual?  In-person  Virtual  Other

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Activity:

Community Partner, if applicable:

Date:

Target Audience:

Projected Attendance:

Facility:

Seating capacity

Estimated ticket/admission pricing, if applicable:

Will the proposed artist participate in this activity?  Yes  No

Is this activity in-person or virtual?  In-person  Virtual  Other

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## Presenter Project Outline (continued)

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Activity:

Community Partner, if applicable:

Date:

Target Audience:

Projected Attendance:

Facility:

Seating capacity:

Estimated ticket/admission pricing, if applicable:

Will the proposed artist participate in this activity?  Yes  No

Is this activity in-person or virtual?  In-person  Virtual  Other

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Activity:

Community Partner, if applicable:

Date:

Target Audience:

Projected Attendance:

Facility:

Seating capacity:

Estimated ticket/admission pricing, if applicable:

Will the proposed artist participate in this activity?  Yes  No

Is this activity in-person or virtual?  In-person  Virtual  Other

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Activity:

Community Partner, if applicable:

Date:

Target Audience:

Projected Attendance:

Facility:

Seating capacity:

Estimated ticket/admission pricing, if applicable:

Will the proposed artist participate in this activity?  Yes  No

Is this activity in-person or virtual?  In-person  Virtual  Other

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**Activity:**

**Community Partner, if applicable:**

**Date:**

**Target Audience:**

**Projected Attendance:**

**Facility:**

**Seating capacity:**

**Estimated ticket/admission pricing, if applicable:**

**Will the proposed artist participate in this activity?**  Yes  No

**Is this activity in-person or virtual?**  In-person  Virtual  Other

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SAMPLE

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## Project Budget

Please note: Each presenter may request a project support grant per application. The total grant award is a combination of two distinct components, structured as such:

- A fee subsidy amount up to 50% of the negotiated artist fee for the engagement, but not to exceed \$10,000, plus:
- A presenter capacity support amount of \$2,000 to support direct project expenses including program staff salary, direct technical personnel fees, audience development, marketing and promotional expenses, technical and equipment rental expenses for virtual engagements, artist travel/lodging expenses, and/or expenses related to public health measures for in-person engagements.

Funding awarded by Mid Atlantic Arts is restricted to the specific, direct costs of the project, as detailed above, and may not be used for indirect costs.

Grants must be matched on a 1:1 basis. The match may not include Federal funds whether they are received directly from a Federal agency or indirectly, such as through a state agency or other entity. In addition, the Mid Atlantic Arts grant and the required match may not be used to match any other directly or indirectly received Federal funds.

## Project Expenses

<b>A. Negotiated Artist Fee</b>	=
<b>B. Other Eligible Expenses</b>	
Programming Personnel	=
Technical Personnel	=
Marketing & Publicity	=
Community Engagement Activities	=
Equipment Rental (virtual engagements only)	=
Artist-related travel and lodging	=
Health and safety expenses for public gatherings	=
<b>B. Subtotal Other Eligible Expenses</b>	=
<b>C. Other Project Expenses</b>	
Printing	=
Postage	=
Shipping	=
Space Rental	=
Equipment Rental (non-virtual engagements only)	=
Visa Application Services (excluding visa fees), if applicable	=
Other Expenses (list below)	=
	=
	=
	=
<b>C. Subtotal Other Project Expenses</b>	=
<b>D. TOTAL CASH EXPENSES (A + B + C)</b>	=

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**Project Income**

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**E. Earned Income**

Ticket Sales (performance) =  
Admissions (other activities) =  
Concession Sales =  
Other Earned Income (list below) =  
=  
=  
=

**E. Subtotal Earned Income** =

**F. Contributed Income**

Foundation/Corporate (list below) =  
=  
=  
  
Government: Federal (list below) =  
=  
  
Government: State/Local (list below) =  
=  
=  
  
Individual Donors =  
Applicant Cash Contribution =

**F. Subtotal Contributed Income** =

**G. Mid Atlantic Arts Grant Request**

50% of Budget Line A (Negotiated Artist Fee), and no more than \$10,000 =  
100% of Budget Line B (Subtotal Other Eligible Expenses), and no more than \$2,000 =

**G. Subtotal Mid Atlantic Arts Grant Request (must equal to or be less than \$12,000)** =

**H. TOTAL CASH INCOME (E + F + G)** =  
Total income must equal total expenses.

**In-Kind Contributions**

Describe the source(s) and amount(s) of any in-kind contributions (donated goods or services) related specifically to this project. These contributions should not be included in the income or expense sections of the project budget (not to exceed 4 lines and 255 characters or approximately 40 words).

**Budget Notes**

Use the space provided to provide explanations on any budget line items, if necessary (not to exceed 10 lines and 700 characters or approximately 100 words).

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## Artist Consent

Have you had the opportunity to share the specific plans and activities of this proposal to the artist and the artist representative?  
 Yes  No

*Note: A transparent communication of the plans and activities in the proposal to the artist is highly encouraged.*

Additional comments: (not to exceed 5 lines and 350 characters or approximately 50 words)

## Certification & Statement of Assurances Sheet

By submitting this application, the applicant agrees to comply with the following federal statutes:

- Title VI of the Civil Rights Act of 1964 as amended
- Section 504 of the Rehabilitation Act of 1973
- The Americans with Disabilities Act of 1990 (ADA)
- The Age Discrimination Act of 1975
- Title VI, Section 504, the Age Discrimination Act
- Title IX and ADA which prohibit discrimination on the basis of race, color, national origin, disability, age or sex in any program or activity receiving Federal financial assistance
- The Native American Graves Protection and Repatriation Act of 1990
- The National Environmental Policy Act, if applicable
- The National Historic Preservation Act, if applicable
- The applicant must also comply with the following statutes regulating lobbying with appropriated monies: Title 18 USC (United States Code) Section 1913, Sec 319 of Public Law 101 – 121 Certification regarding lobbying, etc., and Title 45 CFR (Code of Federal Regulations) Part 1158.

### Certification

By checking this box, I agree that by entering my name in the field below and submitting the data in this application, I certify that this organization meets all eligibility requirements and that all information contained in the submitted application and its attachments is accurate or represent a reasonable estimate of future operations based on information available at the time of submission. I further certify that neither this organization nor any of its principles is presently disbarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from participation in Mid Atlantic Arts' programs by any federal or state department or agency, nor is delinquent in the repayment of any federal debt.

I further certify that this application has been duly authorized by the governing body of the applicant and that I have the authority to execute the application on its behalf.

Name of Authorizing Official

Title of Authorizing Official

Phone

Email

## Statistical Information

**Information on this page is for statistical purposes only and will have no bearing on grant-making decisions.**

**Racial Characteristics: Choose the ONE characteristic that best represents 50% or more of the racial make-up of your organization's staff, or board, or membership:**

### National Data Standard

To answer this section of questions, please consult the "National Data Standard Codes" listing below. Enter the appropriate numerical codes as they apply to your organization or project as specified.


- Organization Status**
- Organization Institution**
- Organization Discipline**
- Project Discipline**

### Legal Status

Which category best describes your organization's legal status?

- 02 Organization – Nonprofit
- 04 Government – Federal
- 05 Government – State
- 06 Government – Regional
- 07 Government – County
- 08 Government – Municipal
- 99 None of the above

### Type of Institution

- 03 Performing Group
- 04 Perf. Group – College/Univ.
- 05 Perf. Group – Community
- 06 Perf. Group for Youth
- 07 Performance Facility
- 08 Museum – Art
- 09 Museum – Other
- 10 Gallery/Exhibition Space
- 14 Fair/Festival
- 15 Arts Center
- 16 Arts Council/Agency
- 17 Arts Service Org.

- 18 Union/Professional Assn.
- 19 School District
- 20 School – PTO
- 21 School – Elementary
- 22 School – Middle
- 23 School – Secondary
- 24 School – Vocational/Tech.
- 25 School – Other
- 26 College/University
- 27 Library
- 28 Historical Society
- 29 Humanities Cncl./Agency
- 30 Foundation
- 31 Corporation/Business
- 32 Community Service Org.
- 33 Correctional Institution
- 34 Health Care Facility
- 35 Religious Organization
- 36 Senior Center
- 37 Parks and Recreation
- 47 Cultural Series Org.
- 48 School of the Arts
- 49 Arts Camp/Institute
- 50 Social Service Org.
- 99 None of the above

### Discipline

Select the discipline that best describes the primary area of work as applies to the applicant and/or project.

- 01 Dance
  - A Ballet
  - B Ethnic/Jazz/Folk-Inspired
  - C Modern
  - D New/Avant garde
- 02 Music
  - A Band – not Jazz/Pop
  - B Chamber

- C Choral
- D New/Experimental/Electronic
- E Ethnic/Folk-Inspired
- F Jazz
- G Popular – includes Rock
- H Solo/Recital
- I Orchestral/Symphonic
- 03 Opera/Musical Theater
  - A Opera
  - B Musical Theater
- 04 Theater
  - A General/Classical/Contemp
  - B Mime
  - D Puppet
  - E Theater for Young Audiences
  - F Storytelling
  - G Avant garde
- 11 Interdisciplinary
  - Pertaining to art forms or works that integrate more than one arts discipline to form a single work. Includes performance art.
- 12 Folk Life/Traditional Arts
  - Pertaining to oral, customary, material and performance traditions informally learned and transmitted in contexts characteristic of ethnic, religious, linguistic, occupational, and/or regional groups.
  - A Folk/Traditional Dance
  - B Folk/Traditional Music
  - D Oral Traditions (includes storytelling)
- 14 Multidisciplinary
  - Pertaining to two or more of the performing arts disciplines listed above