



City of Visalia
Community
Arts Grant Program
2024 - 2025 Application



ONLY complete this form after you have thoroughly read the program Guidelines and Review Criteria.

APPLICANT INFORMATION:

1. Are you applying (**Check one only**):

_____ as an individual

_____ as a representative of an organization

_____ under a fiscal agent (if you check this option please fill out the last page of this application regarding your fiscal agent.)

Contact Person:

Full Legal Name: _____

Cell Phone: _____ E-mail: _____

Position/title with applicant organization/event: _____

For individual applicant only:

Social Security #: _____

For organization application only:

Full applicant organization name: _____

Are you applying under a fiscal sponsor? (Circle One) Yes No

Name of fiscal sponsor (if applicable) _____

Tax ID: _____

Contact Person's Position/Title with applicant organization/event:

Physical Address: _____ City _____ State/Zip _____

Mailing Address (if different from Physical Address):

2. Grant Amount Request (\$250 - \$2500): _____

- Separate attachment required detailing specific use for grant funds (further information about this requirement can be found in the ATTACHMENTS section below)

GENERAL EVENT INFORMATION:

3. Name of event/project: _____
- Name of element (if this is for a smaller part of a larger project): _____

4. Event date(s): _____
5. Type of Event (**Check all that apply**):
_____ Indoors _____ Outdoors _____ Free _____ Entry Fee Required (\$ _____)
If entry fees are required, explain where the proceeds will go: _____

6. Location of Event/Project: _____

7. Projected Attendance/Participants: _____

NARRATIVE (LONG FORM ANSWER) QUESTIONS:

Provide clear and detailed answers for the following "Narrative Questions." Please use a separate document to answer the questions below:

8. Describe clearly what you want to accomplish with the event/project and how you will measure the outcomes.
9. Describe your/your organization's experience with this type of event or project.
10. List the names and roles/positions of individuals who will be key staff and organizers of the event/project. (Separately, attach each key person's artistic resume for our panel to assess their capacity to carry out the proposed activity.)
11. List key individuals/organizations in charge of promoting and marketing this event/project.

MARKETING

12. What date will your marketing materials be ready for print? _____
13. What kinds of marketing elements will include the Arts Consortium and City of Visalia's Community Arts Grant Logo?
_____ Facebook
_____ Instagram
_____ Newspaper
_____ Magazine
_____ Television
_____ Event Program
_____ Other _____

ATTACHMENT CHECKLIST

- _____ Narrative (long form answers)
- _____ Specific use for grant funds (**attach a separate sheet with a breakdown of grant fund use**)
- _____ Please attach a detailed project budget showing the following (**Applications without a budget will not be reviewed**):
- Grant Activity-Related Expenses: everything you have and plan to spend on **PARTICULARLY ARTISTIC HONORARIUMS OR FEES** (broken down by these categories: production expenses, artistic expenses, administrative expenses).
 - Grant Activity-Related Income: all current and projected earnings (broken down by means earned i.e., tickets, admission, sponsorships, donors, other grants.).
 - List: any source and amount of funding already secured for the grant related activity.
- _____ Please provide at least two letters of community members who show strong support for you/your event/organization/cause. These should include any evidence that you/your organization has or will achieve your desired outcomes.
- _____ Please provide 3 samples (event programs, event images, promotional materials) of previous events/projects. Images should be submitted at 300 dpi in resolution, in pdf format.
- _____ Please provide the artistic resumes of all key staff or organizers of the event/project.

SUBMISSION:

Label separate digital files as shown below:

YOURNAME_ORGANIZATIONNAME_CITYGRANT2024
and send to hello@artsconsortium.org.

**ARTS CONSORTIUM and CITY OF VISALIA'S COMMUNITY ART GRANT PROGRAM
FISCAL AGENT/SPONSOR IDENTIFICATION FORM**

Please fill out ALL of the blank lines below with information on the Fiscal Agent (hereinafter referred to as "organization", which actually holds the 501c3 designation), who may receive funds on your behalf.

ORGANIZATION:

Full Legal Name: _____

DBA: _____

Tax ID: _____

SAM UEI Number: _____

Physical Address: _____
City State Zip Code

Mailing Address: _____
City State Zip Code

Organization Website: _____

EXECUTIVE DIRECTOR/CEO:

Name: _____

Phone Number: _____

Email Address: _____

Please use a separate document(s) to provide us with the following information:

1. Mission Statement
2. Core Beliefs
3. Roster of the Board of Directors
4. Board Resolution, or Board Meeting minutes with record of the vote to establish the Fiscally Sponsored Project under the Organization.
5. Past history in the arts

