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Fred Balzac (https://www.submittable.com/help/submitter)



THE ADIRONDACK LAKES CENTER FOR THE ARTS THE ARTS CENTER

(<http://www.adirondackarts.org>)



Following

2021 ADK Quad-County DEC Community Arts Grant Application

Ends on January 31, 2021

ADK Quad-County Decentralization Program for Clinton, Essex, Franklin, and Hamilton Counties

2021 Community Arts Grant Application

Prior to applying for a Decentralization grant, an applicant must read the 2021 Community Arts Grant Guidelines and attend, via Zoom, an informational seminar with the Grant Coordinator. The grant guidelines and seminar schedule will be available soon online at: <https://www.adirondackarts.org/2021-dec-grant-cycle> (<https://www.adirondackarts.org/2021-dec-grant-cycle>).

The application deadline is Sunday, January 31, 2021 at 11:59 p.m. The optional application review deadline is Friday, January 15, 2021.

For more information, please contact Grant Coordinator Fred Balzac at 518-588-7275 or fred@adirondackarts.org. (<mailto:chelsea@adirondackarts.org>).

Adirondack Lakes Center for the Arts

P.O. Box 205, 3446 NYS Rt. 28

Blue Mountain Lake, NY 12812

www.adirondackarts.org (<http://www.adirondackarts.org>).

Section 1: Applicant Summary

Name of Applicant Organization *

Legal name of the organization, which must be a nonprofit, governmental or quasi-governmental, or tribal organization.

Executive director or chief officer at applicant organization *

Full name of executive director or equivalent.

Project Manager *

Full name of the person in charge of administering proposed project.

Project Manager Email ***Project Manager Phone Number *****Is applicant 18 years or older? ***

- Yes, applicant is at least 18 years old.** **No, applicant is not 18 years old.**

Required by NYSCA. If the applicant is not 18 years or older at the time the application is due, the application is not eligible.

Is the applicant organization a fiscal sponsor for one or more artists, a collective, or a group? *

- Yes**
 No

If the applicant organization is a fiscal sponsor, upload a letter of agreement with the sponsored group/artist. The letter must be signed by both parties.

Acceptable file types: **pdf, jpg, jpeg.**

Execute a letter of agreement with the sponsored group/artist that clearly

Choose Files

outlines the administration of the grant and defines mutual responsibilities. For more information, please see "Use of Fiscal Sponsors" section in the 2021 grant guidelines.

No files have been attached yet.

Applicant Organization's Phone Number *

Applicant Organization's Email Address *

Applicant Organization's Mailing Address: Street Address or P.O. Box *

Applicant Organization's Mailing Address: City *

Applicant Organization's Mailing Address: State/Zip *

Applicant's County (please check only one) *

- Clinton
- Essex
- Franklin
- Hamilton

Please check the county in which the applicant organization's legal address is and in which your project is taking place.

Applicant Organization's Website *

If you do not have a website, please include a Facebook page or type N/A.

Section 2: Applicant Organization Summary

What type of organization is the applicant organization? *

- Governmental or quasi-governmental entity
- Tribal organization
- New York State nonprofit

Date of last filing with IRS or date of last filing with the Charities Bureau. *

Month and year. Fill in N/A if this does not apply to your municipality.

Year of Incorporation *

Fill in N/A if this does not apply to your municipality.

On what date does your fiscal year end on? *

Month and year.

Please upload proof of nonprofit status, as well as your organization's current bylaws. *

Acceptable file types: **pdf, doc, docx, jpg, jpeg.**

Choose Files

An applicant organization must be a governmental or quasi-governmental entity, a tribal organization, or a designated New York State nonprofit incorporated in New York State or registered to do business in New York State. Please note that the address on the documentation provided must be within the county where the project is taking place.

Any one of the documents below may serve as proof of nonprofit status and must be submitted with the grant application:

1. Letter of Determination from the IRS indicating tax-exempt status under section 501(c)(3)
2. Documentation of charter by the NY State Board of Regents under section

- 216 of the NY State Education Law
- 3. Documentation of incorporation under Section 402 of the NY State Not-for-Profit Corporation Law
- 4. Current NY State Bureau of Charities (Office of the Attorney General) filing receipt
- 5. Official authorization as an arm of local government (i.e., a formal letter on official stationery signed by the appropriate county, city, town or village executive).

For a nonprofit organization, Include the bylaws in addition to one of the documents listed above. Bylaws are required only from nonprofit organizations.

Select up to 2 files to attach. No files have been attached yet.

Please insert the applicant organization's mission statement. *

Purpose and primary goals of the organization.

Please insert the applicant organization's list of board members. *

Please list current board members of the applicant organization or the municipality.

NYS Senate Representative(s) *

For help use:
<https://www.elections.ny.gov/district-map/district-map.html>
(<https://www.elections.ny.gov/district-map/district-map.html>).

NYS Assembly District and Representative(s) *

For help use:
<https://www.elections.ny.gov/district-map/district-map.html>
(<https://www.elections.ny.gov/district-map/district-map.html>).

U.S. Congressional District and Representative(s) *

For help use:

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

Please upload a recent financial summary statement for the applicant organization. *

Acceptable file types: **pdf, doc, docx, jpg, jpeg.**

A one-page profit and loss summary statement from the applicant organization.

Choose Files

No files have been attached yet.

Please upload the most recent, full year financial statement for the applicant organization. *

Acceptable file types: **pdf, doc, docx, jpg, jpeg.**

Full financial statement from the applicant organization's last completed fiscal year.

Choose Files

No files have been attached yet.

Section 4: Applicant Organization's Funding History

Have you or the organization ever applied directly to NYSCA? *

- Yes**
- No**

Not through a Decentralization grant, but a grant directly administered by NYSCA, including REDC grants.

If yes, please list the year of the most recent application to NYSCA.

Applicants who applied for a NYSCA grant are not eligible to apply for this Decentralization Grant for the 2021 cycle.

Have you or the organization applied for a Decentralization grant before? If yes, please list the years, project titles, and whether it was Arts Education or Community Arts, and whether the

project was funded. If no, state first-time applicant. *

Have you or the organization ever failed to file any of the required reports on time for your Decentralization projects? If so, please explain. *

Section 5: Project Information

Choose the number of projects this application is for. *

- Project A**
- Project B**
- Project C**

You may choose up to 3 projects. If you choose only Project A proceed through the rest of the application. If you choose Project B and/or C you will need to copy and answer questions 1 to 21 separately for each additional project and upload them as separate files below. Please disregard the text box formatting for answers longer than 10 characters.

Total request amount for Project A, B, and C. *

Title of Project A *

Title of Project B (if applicable)

Title of Project C (if applicable)**Additional Application Submissions:**

You may apply for up to 3 projects. If you choose to submit only one project (Project A), please proceed through the rest of the application. If you choose to do 2 or 3 projects (Project B and/or C), you will need to copy and answer questions 1 - 21 in Section 5 separately for each additional project and upload them as separate files below. Please disregard the text box formatting for answers larger than 10 characters.

File Upload

Acceptable file types: **pdf, doc, docx, jpg, jpeg, mp3, mp4, m4a, wav, mov, xls, xlsx.**

Choose Files

Additional project applications and supplemental attachments.

Select up to 30 files to attach. No files have been attached yet.

1. Project Title ***2. Project Location and Address *****3. Discipline of Project ***

- Dance**
- Theatre**
- Literary arts**
- Visual arts**
- Music**
- Other**

Check all that apply

If you chose other, please describe here.

4. Project Dates *

Start and end date.

5. Brief Project Overview *

Limit: 250 words

6. Project Narrative *

The key to writing a successful project narrative is to present a clear, concise, and detailed proposal that falls within the scope of the Decentralization program from which you are requesting funds. A grant proposal is simply a request for funds to support a project or program. Your job is to convince the review panelists that your proposal is worth their support and that you can carry it out at a high level of merit and skill. The project narrative and budget form provide the same information in two different forms. Discrepancies between these two will be noticed and questioned by the review panel. Everything mentioned in the narrative that will produce an expense or income for your project should be accounted for in your budget form. For example, if you say that a local corporation has agreed to give you \$500 towards your proposed project, make sure that contribution is included in your budget form. There are more resources available on our website at: <https://www.adirondackarts.org/grants/dec-grant-resources> (<https://www.adirondackarts.org/grants/dec-grant-resources>).

Limit: 1000 words

7. If this project has been funded by the Decentralization program in previous years, how has the program evolved over time? If this is a new project, please indicate. *

Have you secured additional funding from other sources over time?

Has the project grown either in audience served, artists participating, or project concept?

Has the focus or content of the program changed?

Has the audience grown or been engaged in a different way?

What changes have you made to improve the quality of the program or your outreach to your audience?

8. Please upload artist and program manager resumes. *

Acceptable file types: **pdf, doc, jpg, jpeg.**

Choose Files

One resume per key artist or performing group involved. Bios and artist vision statements may be substituted but, as with the resumes, they are not to exceed one page per artist.

Select up to 12 files to attach. No files have been attached yet.

9. Estimate the number of adults served. *

10. Estimate the number of youth served. *

11. Estimate the total number of audience members served. *

12. How many artists will participate in the project? *

13. If you receive partial funding, will you be able to carry out your project? *

- Yes**
- No**

The review-panel members want to know that, if they grant you less than 100% of your request, your project will still be a success.

14. If yes, how will you make up the deficit and/or how you will adjust your project. *

15. Please upload an anticipated Project Budget using the provided form, which can be found on our website or by emailing fred@adirondackarts.org. *

Acceptable file types: **pdf, xls, xlsx.**

Choose Files

You must use the provided Excel budget form. Please show any projected and/or committed financial support; however, the 25% of financial support that typically must be supplied independently of DEC grant funding is being waived for the 2021 cycle in light of the COVID-19 pandemic. The budget remains important in demonstrating fiscal and managerial competence. Any additional financial support you can show, while not required, is a plus.

Select up to 3 files to attach. No files have been attached yet.

16. Budget Notes *

List in-kind donations and their sources. Explain any large budget numbers. Explain your admission fee rates (if applicable). Explain any numbers that might raise a question.

17. Total Cash Income, if any (excluding the requested grant amount) *

If the project has no additional financial support, enter a zero.

18. Total Cash Expense *

19. Total Grant Request *

Not to exceed \$5,000 TOTAL, whether one project or three.

20. Artistic Sample(s) *

Acceptable file types: **pdf, doc, docx, jpg, jpeg, mp3, mp4, wav, mov.**

Choose Files

Upload at least one file--be selective. Submit only samples that best complement your application and reflect the Artistic Merit of the project.
* Audio Video Samples--no more than 5 minutes. Label clearly with the name of the artist, work title, year of creation.
*Literary Arts--no more than 5 pages
Select up to 5 files to attach. No files have been attached yet.

Comments on artistic sample(s)

Label or describe attached artistic sample(s).

Limit: 250 words

21. Please upload any letters of support.

Acceptable file types: **pdf, doc, docx, jpg, jpeg.**

Choose Files

It is optional to upload up to 3 letters of support from community members expressing the need for the project and/or showing support.
Select up to 3 files to attach. No files have been attached yet.

Section 6: Additional Questions

How did you hear about Decentralization Community Arts grants? *

Did you receive any technical assistance from the Grant Coordinator in completing this application? *

Yes

No

If you choose, use this space to explain your answer to the above technical assistance question.

Limit: 250 words

Section 7: Certification and Release

The undersigned certifies that the applicant:


1. is a principal officer of the applicant organization with authority to obligate it;
2. has knowledge of the information presented herein;
3. has read the guidelines for the 2020 Decentralization Community Arts Grants, incorporated herein by reference, that his/her/their application complies with and is made subject to said guidelines;
4. is aware of Federal Regulation 504 relating to the accessibility of the handicapped to programs and facilities;
5. on behalf of the applicant also releases the Adirondack Lakes Center for the Arts, which is the administrative unit for Decentralization Community Arts Grants, its employees and agents with respect to damages to property or materials submitted in connection herewith. The applicant further agrees that in the event the applicant commences litigation against the Adirondack Lakes Center for the Arts, and/or the New York State Council on the Arts, then, in that event, the applicant shall be fully liable for any and all costs, including attorneys' fees incurred by the Adirondack Lakes Center for the Arts and/or the New York State Council on the Arts, their employees and agents in defense of the subject litigation;
6. declares that all statements contained in this application are true and correct and understands that false or incorrect information in the application may lead Adirondack Lakes Center for the Arts to request the return of funds awarded through this application and may disqualify the applicant and applying organization from this and future Decentralization grants opportunities.

Check here to agree to the above terms. *

Electronic signature of applicant organization's executive director, chief officer, board president, head of municipality. *

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