

RALEIGH ARTS COMMISSION 2015-2016 GRANT CHECKLIST - PROGRAM SUPPORT



Applicant Name: _____

APPLICATION DOCUMENTS - ORIGINALS

Submit one original copy of each of the following documents. Documents must be submitted in the order below, single-sided and paper-clipped together.

- Grant Checklist
- Program Support Grant Application Form
- Narrative
- Budget Forms A, B, C
- Deficit Reduction Plan (organizations with net loss in last completed fiscal year only)
- Program Support Budget Form
- Remaining Project Expenses Sheet (if applicable)
- In-Kind Contributions Sheet (if applicable)
- Participation Statistics Form
- Board Information Form
- Accessibility Checklist
- Bios of Lead Personnel
- Samples of Programmatic Evaluation Tools

COPY OF APPLICATION DOCUMENTS

Submit one extra copy of all the application documents above. Documents must be submitted in the order listed above, single-sided and paper-clipped together.

- 1 Copy of all Application Documents

APPLICATION ATTACHMENTS

Submit one copy of each of the following documents:

- DVD Documenting Quality of Proposed Programming (Optional)
- Audit Report* (required for requests of \$25,000; optional for requests under \$25k)
- Support Materials - publicity, reviews and marketing materials

PROOF OF ELIGIBILITY

New applicants that have never received funding from the City of Raleigh Arts Commission in the past must submit the following documents. Submit one set of documents per organization regardless of the number of grant applications being submitted. **Current or recent grant recipients should NOT submit these items unless their organization has revised them.**

- Federal Letter of Tax Exemption
- North Carolina Letter of Tax Exemption
- Articles of Incorporation
- Bylaws
- Conflict of Interest Policy

*NOTE: Any current grant recipient that submitted their most recently completed audit report to the Arts Commission in 2014 should NOT resubmit an additional copy with their grant application.

**RALEIGH ARTS COMMISSION
2015-2016 GRANT APPLICATION - PROGRAM SUPPORT**



SUBMISSION DEADLINE: Monday, January 5, 2015, 4pm

MAILING ADDRESS: Office of Raleigh Arts
City of Raleigh
P.O. Box 590
Raleigh, NC 27602

DELIVERY BY HAND: Office of Raleigh Arts
127 West Hargett St., Suite 408
Raleigh, NC 27601

SECTION A - APPLICANT INFORMATION

Applicant Name: _____

Federal Tax ID# (EIN): _____ Year Organization Incorporated: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ TTY: _____

Website: _____

Grant Application Contact Person

Name: _____ Title: _____

Phone: (W) _____ (C) _____

Email: _____

SECTION B - GRANT REQUEST

Amount Requested: _____ Program Dates: _____ to _____

Program Title/Description:

SECTION C - ASSURANCES

The applicant assures the City of Raleigh Arts Commission that:

1. The activities and services for which assistance is sought will be administered by or under the supervision of the applicant.
2. The filing of this application has been duly authorized by the governing body of the applicant.
3. The applicant will expend funds received as a result of this application solely for the described project or program.

By signing this application, the applicant hereby assures and certifies that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.), the Americans with Disabilities Act of 1990 (42 U.S.C. 12101-12213) and, where applicable, Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.) as well as all regulations of the National Endowment for the Arts issued pursuant to these statutes and that it immediately will take any measures necessary to comply.

This application will not be accepted without three original signatures (two of these can be the same person).

Board President

Signature

Date

Name/Title

**Executive Director
or Chief Fiscal
Officer**

Signature

Date

Name/Title

**Project/Program
Director**

Signature

Date

Name/Title

Please Note:

If this application is being submitted by an organization acting as a fiscal agent for another organization, the Board President and Chief Fiscal Officer of the organization acting as fiscal agent and holding the not-for-profit letter of determination must sign this application.

SECTION D - AUDIT RESPONSE

In the space provided below, the Board President should note how the organization has addressed or is addressing the previous year audit findings and/or management letter comments or recommendations. If there are no findings, comments and/or recommendations, this should be noted. The audit must be accompanied by the auditor's letter. The signature of the Board President confirms his/her review and approval of the audit(s).

Signature

Date

Name/Title

SECTION E - MISSION STATEMENT

SECTION F - ORGANIZATIONAL PROFILE