

**Department of Culture, Recreation & Tourism
Office of Cultural Development
Louisiana Division of the Arts**

**INSTRUCTIONS for completing the
LOUISIANA ARTS ECONOMIC RECOVERY GRANTS
APPLICATION FORM**

Application deadline: August 17, 2009

**PLEASE CLOSELY FOLLOW THESE INSTRUCTIONS TO COMPLETE THE APPLICATION FORM.
QUESTIONS? Contact Kathleen Sarsfield with OCD Special Projects at (225) 342-8200 or ocd.info@crt.state.la.us**

- 1. GRANT CATEGORY:** (already completed: ARTS ECONOMIC RECOVERY GRANT)
- 2. ORGANIZATION NAME:** Official registered name of your organization.
- 3-5, & 7. MAILING ADDRESS AND PARISH:** Provide the permanent address or physical location.
- 6. EMPLOYER ID NUMBER:** Provide the EIN of your organization.
- 8-10. LA HOUSE DISTRICT, LA SENATE DISTRICT, AND US CONGRESSIONAL DISTRICT:** These are determined by the physical address provided above and are available from your local Registrar of Voters, Clerk of Court, or on-line at <http://www.legis.state.la.us/district/zipcode.asp>.
- 11. CONTACT NAME:** The contact person must be able to answer all questions about the application and be available during the application review time.
- 12-14. PHONE NUMBER, FAX NUMBER, AND EMAIL ADDRESS** for the contact person of the organization.
- 15. WEB ADDRESS** of the organization.
- 16. APPLICANT DISCIPLINE.** Indicate the artistic discipline of the organization. Organizations with an independent board of directors whose mission is to provide arts programming to the public should indicate an artistic discipline. Other organizations whose mission is related to something other than the arts or humanities should indicate "15: None of the Above/Non-arts, Non-humanities." Enter the appropriate code from the list below.

01 **DANCE**
01A Ballet
01B Ethnic/Jazz
01C Modern

02 **MUSIC**
02A Band
02B Chamber
02C Choral
02D New
02E Ethnic [includes folk inspired]
02F Jazz
02G Popular
02H Solo/Recital
02I Orchestral

03 **OPERA/ MUSICAL THEATRE**

03A Opera
03B Musical Theatre

04 **THEATRE**

04A General

04B Mime
04D Puppet
04E Theater for Young
Audiences
04F Storytelling
10C Playwriting

05 **VISUAL ARTS**

05A Experimental
05B Graphics/Printmaking
05D Painting
05F Sculpture
05G Drawing
08 Photography

07 **CRAFTS**

07A Clay
07B Fiber
07C Glass

07D Leather
07E Metal
07F Paper
07G Plastic
07H Wood
07I Mixed Media

06 **DESIGN ARTS**

06A Architecture
06B Fashion Design
06C Graphic
06D Industrial
06E Interior
06F Landscape Architecture
06G Urban/Metropolitan

09 **MEDIA ARTS**

09A Film
09B Audio
09C Video
09D Technology/Experimental
10E Screenplay Writing

10 **LITERATURE**

- 10A Fiction
- 10B Non-fiction
- 10D Poetry

12 **FOLKLIFE**

- 12A Folk/Traditional Dance
- 12B Folk/Traditional Music

12C Folk/Traditional Crafts
and Visual Arts

12D Oral Traditions
(includes folk/traditional
storytelling)

NONE OF THE ABOVE

- 11 Interdisciplinary
(includes performance art)
- 13 Humanities
- 14 Multidisciplinary
- 15 Non-Arts/Non-Humanities

17. APPLICANT TYPE. Enter the appropriate 2-digit code from the list below into the space provided.

- | | |
|--|--------------------------------------|
| 01 Individual - Artist | 27 Library |
| 02 Individual - Non-artist | 28 Historical Society/Commission |
| 03 Performing Group | 29 Humanities Council/Agency |
| 04 Performing Group - College/University | 30 Foundation |
| 05 Performing Group - Community | 31 Corporation/Business |
| 06 Performing Group - for Youth | 32 Community Service Organization |
| 07 Performance Facility | 33 Correctional Institution |
| 08 Museum - Art | 34 Health Care Facility |
| 09 Museum - Other | 35 Religious Organization |
| 10 Gallery/Exhibition Space | 36 Seniors' Center |
| 11 Cinema | 37 Parks and Recreation |
| 12 Independent Press | 38 Government - Executive |
| 13 Literary Magazine | 39 Government - Judicial |
| 14 Fair/Festival | 40 Government - Legislative (House) |
| 15 Arts Center | 41 Government - Legislative (Senate) |
| 16 Arts Council/Agency | 42 Media - Periodical |
| 17 Arts Service Organization | 43 Media - Daily Newspaper |
| 18 Union/Professional Association | 44 Media - Weekly Newspaper |
| 19 School District | 45 Media - Radio |
| 20 School-Parent-Teacher Association | 46 Media - Television |
| 21 School - Elementary | 47 Cultural Series Organization |
| 22 School - Middle | 48 School of the Arts |
| 23 School - Secondary | 49 Arts Camp/Institute |
| 24 School - Vocational/Technical | 50 Social Service Organization |
| 25 School - Other | 51 Child Care Provider |
| 26 College/University | 99 None of the Above |

18. APPLICANT STATUS. Use the drop-down menu to select the appropriate 2-digit code.

- | | |
|------------------------------|-----------------------------|
| 01 Individual | 06 Organization – Regional |
| 02 Organization – Non-profit | 07 Organization – Parish |
| 03 Organization – Profit | 08 Organization – Municipal |
| 04 Organization – Federal | 09 Organization – Tribal |
| 05 Organization – State | 99 None of the Above |

19. APPLICANT ARTS EDUCATION. Use the drop-down menu to select the appropriate 2 or 3 character code. An organized and systematic educational effort with the primary goal of increasing an identified learner's knowledge of and/or skills in the arts with measurable outcomes.

01. 50% or more of the activities are arts education directed to:

- A. K-12 students
- B. Higher education students
- C. Pre-kindergarten children
- D. Adult learners (including teachers and artists)

02. Less than 50% of the activities are arts education directed to:

- A. K-12 students
- B. Higher education students
- C. Pre-kindergarten children
- D. Adult learners (including teachers and artists)

20. ORGANIZATION'S RACIAL CHARACTERISTICS. Select the racial characteristic(s) that best represents your organization, 50% or more of the board or governing authority, staff members, and your general membership. We collect this information in order to report it to the National Endowment for the Arts.

21. 501(C)3 STATUS. Use the drop-down menu to indicate whether the applicant organization has 501c3 status.

22. YEAR INCORPORATED. Indicate the year that the applicant organization was incorporated.

23. GRANT REQUESTED AMOUNT: Indicate the dollar amount you are requesting.

24. GRANT DESCRIPTOR: (already completed: SALARY SUPPORT)

25. PROVIDE ONE SENTENCE GENERALLY DESCRIBING THE INTENT OF THE USE OF GRANT FUNDS:

Provide a one-sentence summary of how you would use your grant funds if awarded funding. This information is used for legislative reports and public information. Be clear and concise.

26a. # of INDIVIDUALS your organization serves annually. State the number of people (including children) that are involved with or impacted by your programming or your outreach activities.

26b. CHARACTERISTICS OF INDIVIDUALS BENEFITING: Check the characteristics of significant portions (25% or more of total) of the individuals benefiting. If your programming is designed for youth or arts-in-education programs, please indicate if 50% or more are children.

- | | |
|---|---|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black/African-American | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> White |
| <input type="checkbox"/> No Single Group | <input type="checkbox"/> 50% or more are children |

27a. # ARTISTS employed by your organization (do NOT include children): Indicate the number of artists employed by your programs and services.

27b. Check the characteristics of significant portions (25% or more of total) of the **ARTISTS EMPLOYED** by your organization.

- | | |
|---|---|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black/African-American | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> White |
| <input type="checkbox"/> No Single Group | <input type="checkbox"/> 50% or more are children |

28-29. SIGNATURES. Signatures are required. The *Authorizing Official* is most often the president of the board or governing authority for the organization. The *Chief Fiscal Officer* should be the individual immediately responsible for the disbursement of funds for the organization, usually the treasurer.

PAGE 2. ORGANIZATION BUDGET SUMMARY.

A. Use this form to submit a budget for your last completed fiscal year.

B. Submit a budget detail explaining line items including "List sources" or "Itemize." If your organization has emergency, endowment or capital funds, provide a brief overview and indicate the amount(s) as an addendum to this budget. If your organization has a deficit or accumulated deficit, please outline your organization's plans to address this shortfall.

C. Round all dollar amounts to the nearest \$1.

1. Date of Last Completed Fiscal Year.

2-42. Applicant's Organization Budget. Use the Glossary at <http://www.crt.state.la.us/arts/Guidelines/Glossary.pdf> for definitions.

PAGE 3.

Americans with Disabilities Act Questionnaire. We collect this information in order to report it to the National Endowment for the Arts.

APPLICATION CHECKLIST – PLEASE DOUBLE CHECK BEFORE YOU SEND IT.

Applicants will be notified of funding status by Tuesday, September 15, 2009.