



Washington County Arts Council, Inc.
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Hagerstown, Maryland 21740
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www.washingtoncountyarts.com

Enriching the cultural, educational, social, and economic life of our community by nurturing the arts.

GRANT APPLICATION

FY 2024 (for projects and services occurring July 1, 2023 - June 30, 2024)

Please:

- Read all [guidelines and instructions](#) before completing this application.
- Submit the original application plus five copies (total of six) by August 13, 2023.
- Type this application using this form.
- Attach copies of any supporting material to each application copy.

1. Applicant Organization: _____
2. Program Title: _____
(Example: Hagerstown Community Theater's production of "Macbeth")
3. Requested amount \$ _____
4. Applicant Organization's Street Address:
5. City/State/Zip:
6. Primary Contact Person, Title:
7. Phone Number:
8. Email Address:

9. Narrative: summarize the project, including specific details of the following: purposes; description of event(s) or service; description of artist(s); describe the anticipated audience.
10. Have you applied for or received funding from other sources for this project?
- ☐ YES ☐ NO
11. If YES, please list those sources and amount received here:
- a.
 - b.
 - c.
 - d.
 - e.
12. What is the date(s) and location(s) for the project? If more than one date or location, list them here:
- a.
 - b.
 - c.
 - d.
 - e.
 - f.
 - g.
 - h.
 - i.

13. ARTISTIC PERSONNEL
 - a. Who are the participating artists and what are their disciplines?
 - b. How much will artists be paid (i.e., rate per service)
14. TECHNICAL PERSONNEL
 - a. Who are participating technical personnel and what are their areas of expertise?
 - b. How will the technical personnel be compensated?
15. ADMINISTRATIVE PERSONNEL
 - a. Who are participating administrative personnel and what are their duties?
 - b. How will administrative personnel be compensated (i.e., hourly wage)?
16. Specify travel expenses (i.e., mileage, hotel, etc.)
17. Describe in detail your outreach and media relations plan.
18. Describe the demographic of the audience or population served, with a projected total of persons reached by this project.
19. How many years has this project been in operation?
20. How will you evaluate the success of this project?

21. Please speak to how the applicant organization addresses equity, inclusion, racism, and reaching out to marginalized communities.
22. Please specify who benefits from the work of the CAD applicant organization.
23. How do you plan to acknowledge WCAC's support of your project in all printed materials and promotional campaigns for this project?
24. If you have received a CAD grant from the WCAC in the past, how did you acknowledge WCAC's support of the project in your printed materials and promotional campaigns for this project?

Supporting documentation may be attached to this proposal, including references, résumés, publicity, programs, etc. Copies of support information should accompany all six copies of your application.

PLEASE NOTE: You may use one document to include all narratives. Use the corresponding number in your document. Thank you.

PROJECT BUDGET

Grant monies may only be used for the expenses specific to this project. Listed expenses must be costs additional to the organization's operating budget. If this is a startup project, leave the budget columns for past year and current year blank.

EXPENSES*

	FY 2022 actual	FY 2023 actual	FY 2024 projected
Artistic personnel			
Technical personnel			
Administrative personnel			
Space: rent & utilities			
Marketing & promotion			
Equipment rental			
Supplies & materials			
Printing			
Insurance			
Travel			
Office expense			
Other (specify)			
TOTAL EXPENSE			

REVENUES

	FY 2022 actual	FY 2023 actual	FY 2024 projected
Memberships			
Admissions/ticket sales			
Tuitions or fees			
Cash carry-over			
Corporate support			
Private support			
Interest/dividends			
Foundation grants			
State/regional grants			
Federal grants			
Other (specify)			
TOTAL REVENUE			

* Invoices may be required as part of your final report.

Describe non-cash donations that have been made available to you for this program/project. In-Kind Contributions are services which ordinarily would be paid for by your organization but are

being voluntarily contributed to help carry out your activities. These can include use of equipment, administrative costs, supplies, materials, and services as well as volunteer services by a professional person which may be claimed at his/her regular rate if the services rendered are of a professional nature and are within the professional's field.

Salaries	
Equipment	
Fees	
Supplies	
Travel	
Rental	
Other	
TOTAL IN-KIND	

Attachments: The following material must be attached to each copy of your application. If not attached, your application will be returned.

- a. A detailed financial statement for your organization's last completed fiscal year, including actual income and expenditures.
- b. A detailed projected budget for your organization's present fiscal year, including income and expenditures.

I hereby certify that the information and financial figures contained in this application and attachments are true and accurate.

Authorized signature_____

Printed Name & Title_____

Date_____