



WASHINGTON COUNTY *Arts Council*

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WCAC *We Create Accessible Culture* Grant

2025-2026 GRANT APPLICATION

Note for Previous Applicants:

This grant was formerly known as the CAD (Community Arts Development) Grant. It has been renamed the **WCAC *We Create Accessible Culture* Grant** and updated to better reflect our goals and priorities.

All applicants:

Please review the [revised guidelines](#) carefully before applying.

Submit the original application plus six copies (total of seven) by August 15, 2025.

Use this form to complete the application. Attach copies of supporting material to each application.

1. Applicant Organization or Artist:
2. Program Title:
3. Primary Contact, Title:
4. Requested amount \$ _____
5. Applicant or Applicant Organization's Street Address:
6. City/State/Zip:
7. Phone Number:
8. Email Address:
9. Relevant website and social media handles, if any:

NARRATIVE

10. Project Summary (Max 2000 characters)

Please provide a brief summary of your proposed project. What do you plan to do, who will be involved, and what do you hope to achieve? Be sure to include the type of arts programming, the audience you intend to reach, and the overall benefit to the Washington County community.

11. Project Description

Describe your project in greater detail. Include: what is the purpose of your project, and what goals do you hope to accomplish? What specific activities, events, or services will you offer, and when and where will they take place? Who are the artists or cultural workers involved, and how were they selected? Who is your intended audience, and how will you engage them? How will your project benefit residents of Washington County? What is the history of this project, is it new or for how many years has this project been in operation? Finally, what impact do you hope to see as a result of this project, and how will you evaluate its success?

GENERAL

12. What is the date and location for the project?

If there is more than one date or location, list them here:

- a.
- b.
- c.
- d.
- e.

PERSONNEL

13. Who are the participating artists and what are their disciplines? How were the artists selected? Artist work samples and artist CVs may be attached to this application and are encouraged.
14. Who are the technical personnel participating and what are their areas of expertise?
15. Who are the administrative personnel participating and what are their duties?

MARKETING AND OUTREACH

16. Please describe in detail how the applicant organization as well as the specific program addresses diversity equity, inclusion, accessibility, belonging and outreach to marginalized communities.
17. Describe in detail your marketing 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. Please specify who benefits from the work of the WCAC applicant organization.
20. How do you plan to acknowledge WCAC's support of your project in all printed materials and promotional campaigns for this project?
21. 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?

BUDGET

22. Have you applied for or received funding from other sources for this project?

☐ YES ☐ NO

If YES, please list those sources and amount received here:

a.

b.

c.

d.

23. **Budget Narrative**

In narrative form, describe how grant funds will be used within the overall project budget. Clearly identify which expenses WCAC funds will support, and explain how artists, technical personnel, and administrative staff will be compensated (e.g., hourly rate, flat fee, per event). Include a breakdown of anticipated travel expenses, such as mileage, lodging, and per diem, if applicable. This narrative should align with the itemized budget you attach and help reviewers understand how funds will be allocated in support of the project's goals.

ITEMIZED PROJECT BUDGET

Grant funds may only be used for expenses directly related to this project. All listed expenses must be *in addition* to your organization's regular operating budget. If this is a startup project, you may leave the first two budget columns blank.

EXPENSES*

	FY 2024 actual	FY 2025 actual	FY 2026 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 2024 actual	FY 2025 actual	FY 2026 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 the 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	

SUPPORTING DOCUMENTATION

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

ATTACHMENTS FOR NONPROFIT APPLICANTS

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_____