

**FY 2018 Sponsored Organization Information Form**

**- New York State Council on the Arts -**

**Basic Organizational Information**

Organization Name \_\_\_\_\_

AKA \_\_\_\_\_

Federal Employer ID# \_\_\_\_\_

Year Founded \_\_\_\_\_

Web Site(URL) \_\_\_\_\_

Organization's Phone \_\_\_\_\_

Address1 \_\_\_\_\_

Address2 \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Applicant County \_\_\_\_\_

## Project Contact

Name

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Title

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Phone

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Fax

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Email Address

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### **Organization Mission**

(1000 character limit)

### **Organization Activities**

(1000 character limit)

Activities: Give a brief summary of your organization's activities that provides a general overview of what you do as an organization. Please relate these activities to your mission statement in the previous question.

### **Organization Constituency**

(1000 character limit)

Given your mission to the community you serve, how does your organization address diversity and inclusiveness?

What actions has your organization taken to make your facilities, programs, and/or communications systems accessible and usable by all?

Briefly describe your facilities, if any. Explain any relocations, expansions, renovations, or major improvements undertaken in the recent past or planned for the future.

**Organization Facilities (if applicable)**

Organization's facilities/real estate are:  Owned  Rented  Donated  Shared

If rented, date current lease expires?

Days/Hours/Season of Operation

Please indicate the number of each event your organizations hosts annually. Enter zero if your organization does not host a particular event:

Productions

Exhibitions

Classes

Tours

Films

Lectures

Performances



**FY2018 Sponsored Organization Budget Form  
- New York State Council on the Arts -**

	Prior completed fiscal year	Last completed fiscal year	Current fiscal year (actual plus projected)
<b>EARNED INCOME</b>			
Admissions			
Contracted Services			
Tuition and Workshop Fees			
Fundraising Events			
Other Earned Revenue			
<b>Total Earned Income</b>			

<b>CONTRIBUTED INCOME</b>			
Corporate Support			
Foundation Support			
Private Support			
NEA Support			
Federal Support			
State Support (non-NYSCA)			
County Support			
Municipal Support			
<b>Total Contributed Income</b>			
Other Revenue			
<b>TOTAL INCOME</b>			

<b>EXPENSES</b>			
Personnel - Administrative			
Personnel - Artistic			
Personnel - Technical/Production			
Fringe Benefits			
Outside Artistic Fees and Services			
Other Outside Fees and Services			
Regrants			
Space			
Travel			
Marketing/Advertising			
Remaining Operating Expenses			
<b>TOTAL EXPENSES</b>			

	Prior completed fiscal year	Last completed fiscal year	Current fiscal year (actual plus projected)
<b>Surplus (Deficit) Before NYSCA</b>			
NYSCA Grants Received/Requested			
<b>Surplus (Deficit) After NYSCA</b>			

<b>IN-KIND CONTRIBUTIONS</b>			
In-Kind Contributions			

<b>ORGANIZATION ASSETS</b>			
Savings / Checking Accounts			
Endowment Funds			
Capital Property / Real Estate			

**FY2018 Sponsored Project Budget Form  
- New York State Council on the Arts -**

	<b>Project Budget</b>
<b>EARNED INCOME</b>	
Admissions	
Contracted Services	
Tuition and Workshop Fees	
Fundraising Events	
Other Earned Revenue	
<b>Total Earned Income</b>	

<b>CONTRIBUTED INCOME</b>	
Corporate Support	
Foundation Support	
Private Support	
NEA Support	
Federal Support	
State Support (non-NYSCA)	
County Support	
Municipal Support	
<b>Total Contributed Income</b>	
Other Revenue	
<b>TOTAL INCOME</b>	

<b>EXPENSES</b>	
Personnel - Administrative	
Personnel - Artistic	
Personnel - Technical/Production	
Fringe Benefits	
Outside Artistic Fees and Services	
Other Outside Fees and Services	
Regrants	
Space	
Travel	
Marketing/Advertising	
Remaining Operating Expenses	
<b>TOTAL EXPENSES</b>	



<b>Surplus (Deficit) Before NYSCA</b>	
NYSCA Grants Received/Requested	
<b>Surplus (Deficit) After NYSCA</b>	

**Budget Notes**  
(2000 character limit)

## Sponsored Request Form

### Special Arts Services

Answer all questions below for the specific category for which you are applying below on this form, including the Organization Profile, Organization Budget, and Project Budget and return to your Fiscal Sponsor along with your support materials. A completed Sponsored Request Form is required from all sponsored organizations and individuals. In the event that an applicant fails to submit the completed Sponsored Request Form, the application will not be eligible for review. Please review the [program guidelines](#) carefully for program prerequisites and eligibility requirements.

**Only complete those questions that correspond to the category for which you are applying:**

1. Project Support
2. Instruction & Training

(2000 character limit per question)

#### **Project Support**

Artist/Organization Name

Project ID

#### ***Artistic/Programmatic***

##### **1. Program Summary**

Describe your project, providing an overall summary and context. For performing arts programs, discuss special features such as guest artists or new works. Include title(s), number of productions and performances of each. For exhibitions, provide a brief summary of the program content and design and list the artists, objects/art work being presented. For a service activity, indicate its relationship to other programs in your organization. If this organization is a first-time applicant to Special Arts Services, provide a brief history of proposed programs and achievements that relate to this request.

## **2. Changes/Developments**

If not a first-time request, describe any significant changes or developments since the last Council review. Highlight any recent achievements or programmatic challenges. Indicate how the proposed project relates to your organization's mission and/or history of programs for community audiences. What planning and/or research has been completed to ensure the project's success? Note whether the program marks a new direction for the organization.

## **3. Project Staff**

Detail the key staff and/or consultants, as well as their qualifications, as related to this project. Describe their credentials and relationship to the community served.

#### **4. Artists**

Please provide brief bios of participating artists. Describe how the artists are involved in or are contributing to the program content and design. What is the financial arrangement with the artists?

#### **5. Facilities**

Describe the community-based facilities in which the activities will take place. For performing arts programs, detail their suitability in terms of production values, including lights, sound, floor, and other performance requirements. Note challenges, if any, and plans to address them.

**6. Touring**

If this is a touring request, list the venues and dates. Describe the fiscal and programmatic responsibilities of any host organization.

**7. Time Frame**

For exhibitions, what is the time frame for the exhibition(s) and what are gallery hours when it is open to the public?

**Managerial/Fiscal**

**8. Staff**

List principal administrative staff, and indicate their qualifications and duties. Include any recent relevant changes or developments in the organization's management, and describe any changes expected for the proposed grant period

**9. Governance**

Describe the board's committee structure, diversity, meeting schedule, and approach to staff and fiscal oversight.

**10. Finances**

As NYSCA can only support up to 50% of a project's cost, detail how other funds will be raised. Please use the budget notes to itemize the project budget indicate revenue that is confirmed or secured. Detail the plan for meeting the expenses of the program, highlighting new sources of income and new fundraising projects or initiatives. NOTE: Do not include in-kind services as part of the project budget, include them separately in the budget notes field.

***Service to the Public***

**11. Mission and Audience**

Describe the primary audience for this project and why this project is important and/or appropriate to that audience. Be sure to include the projected number of participants and their cost to participate. Please explain the significance of the proposed program or service in relation to the organization's mission, long range or strategic plan, and the audience served. Describe your efforts to be responsive to community needs and demographics and list the results.

## **12. Marketing and Promotion**

Discuss how this project will be marketed, and explain how the efforts will reach the project's intended audience, including use of the Internet and social media, ticket pricing, etc., and describe recent success.

## **13. Community Context**

Identify other organizations which provide similar or complementary arts services to the community. How does the organization work in partnership with them?



#### 14. Evaluation

Describe primary expectations for this project and explain how it will contribute to the organization's public service. Discuss the method(s) used to measure this impact.

#### Project Support /Support Materials:

1. *Résumés or biographical statements* of project staff/consultants, maximum of 1 page each.
2. Up to 10 images or website reference, that best illustrates your project. For exhibitions this must consist of selected images of art/artifacts which will be included in the exhibition and examples of the exhibition designer's past work. Be sure to identify the images. Adobe Acrobat PDF or PowerPoint is preferred.
3. Depending on the focus of your project request, please upload to the Pre-Submission- menu of the Grants Gateway Grant Opportunity Portal one other support document.

Suggestions are below:

- a) **Exhibitions:** Exhibition design layout or sample exhibition script.
- b) **Catalog/Publication:** Outline and sample text of no more than five pages.
- c) **Workshops:** Marketing materials related to this program.
- e) **Public Programs:** Marketing materials related to these programs.
- f) **Salary Support:** Job description with qualifications and personnel policy
- g) **Services to the Field:** Promotional materials for this project.
- h) **Other:** One other document which supports your project.

## **Instruction & Training**

Artist/Organization Name

Project ID

### ***Artistic/Programmatic***

#### **1. Project Overview**

Describe the program's instructional goals. Where will the workshop be held? Detail the registration fee, scholarship options and selection process. Detail the compensation instructors will receive. How will the organization recruit and select participants? How will this program be documented and disseminated?

#### **2. Project Context**

Provide context to show how this project builds on similar work in your field, is unique or tackles an issue/problem in the field in a new way.

**Managerial/Fiscal**

**3. Project Lead or Team**

Highlight the qualifications of the individual (or team) demonstrating how the individual or team possesses the necessary experience and qualifications to advance this project.

**4. Project Management**

Detail the time frame for project completion during the application grant period. If more than one person is involved, describe how the work will be delegated or coordinated.

**5. Finances**

As NYSCA can only support up to 50% of a project’s cost, detail how other funds will be raised. Please use the budget notes to itemize the project budget indicate revenue that is confirmed or secured. Detail the plan for meeting the expenses of the program, highlighting new sources of income and new fundraising projects or initiatives. NOTE: Do not include In Kind services as a part of the project budget; indicate them separately in the budget notes field.

***Service to the Public***

**6. Project Accessibility**

Define the project’s intended audience and how this project will be made accessible to that audience.

## Instruction & Training Support Materials:

1. Student event and program schedule form: Organizations returning from multi-year funding must complete the program/class schedule for each year of the previous funding cycle. New applicants or grantees returning from single year funding must complete the program/class schedule for the most recently completed season and the current season. Download [the form \[here\]](#), fill in and then upload to the pre-submission upload menu of the grants gateway grant opportunity portal application.
2. *Résumés or biographical statements* of Instructors and other key personnel including class schedules and curriculum brochures to be uploaded to the pre-submission upload menu of the grants gateway opportunity portal application.
3. Representative list of former students who have entered professional careers to be uploaded to the pre-submission upload menu of the grants gateway grant opportunity portal application
4. Representative list of former students who have entered professional careers to be uploaded to the pre-submission upload menu of the grants gateway grant opportunity portal application. 4. If applicable, a list of scholarship students for the current year, noting whether full or partial scholarship. Also, indicate the number of years in which subsidy was received and which scholarships are projected to continue in 2016 to be uploaded to the pre-submission upload menu of the grants gateway grant opportunity portal application.