

# 2012 Arts & Cultural Council for Greater Rochester Capacity Building Grant Application

**Deadline:** Received in Arts & Cultural Council Office by November 3, 2011 @ 5:00 PM  
**Send to:** 277 N. Goodman Street, Rochester, NY 14607. Answer all information.  
**Handwritten applications are not accepted.**

## A. BACKGROUND:

Applicant Organization's Legal Name: \_\_\_\_\_

Executive Director/Authorized Signatory: \_\_\_\_\_

Project Manager: \_\_\_\_\_

*Remember to include resumes of all project managers/contact personnel with your application*

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Day phone: \_\_\_\_\_ Eve. phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Website: \_\_\_\_\_

Incorporation date or date formed: \_\_\_\_\_ Fiscal year begins: \_\_\_\_\_ Ends: \_\_\_\_\_

Fiscal year end (Date/Month) \_\_\_\_\_

For last completed fiscal year: Revenues: \$ \_\_\_\_\_ Expenses: \$ \_\_\_\_\_

Have you applied for a Capacity Building Grant within the past 3 years?      **Y**      **N**

If **Yes**, did you receive funding?      **Y**      **N**

## B. PROJECT INFORMATION:

Project Title: \_\_\_\_\_

**Required:** Please summarize your project in **50 words or less**. Note: This will be the description used by the Arts & Cultural Council to identify and publicize your project. **Do not skip this step!**

Project starting date: \_\_\_\_\_ Project ending date: \_\_\_\_\_

Total project expense: \$ \_\_\_\_\_ 2012 Capacity Building Grant amount requested: \_\_\_\_\_

**C. CERTIFICATION:** The undersigned certifies that he/she (1) is the principal officer of the applicant with authority to obligate it; (2) has knowledge of the information presented herein; (3) has read and understood the guidelines of Arts & Cultural Council for Greater Rochester Capacity Building Grant Program and complies with, and is made subject to said guidelines; (4) releases Arts & Cultural Council, its employees and agents with respect to damages to property or materials submitted with this application.

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**AUTHORIZED SIGNATURE (This might be different from the project manager.)**

**Download and review the “CAPACITY BUILDING 2012 Budget Form” and “Instructions for Completing the CAPACITY BUILDING 2012 Budget Form” documents from our website ([ArtsRochester.org](http://ArtsRochester.org)) before continuing.** Hard copies of these documents are available upon request.

**D. PROJECT DESCRIPTION:** Must be typed or computer generated on no more than two 8.5” x 11” sheets. Do not use a font smaller than 12 point. Be sure to collate all materials and binder-clip them together. Do not place them in three-ring binders. Do not include a cover letter.

1. Organization background: Provide a brief description of your organization’s mission, objectives, and major programs.
2. Describe your project, the goals and objectives and how they will be met. How will it constitute capacity building for your organization?
3. How do you plan to evaluate your proposal to determine whether or not it meets goals and objectives? (Include in your support materials any surveys or other feedback mechanisms you plan to use.)
4. What is your project timeline? (May be attached. If attached, does not count toward 2 page limit).
5. How will your project improve your organization’s operating efficiencies?
6. How will you revise your program if you do not receive full funding? Having a back-up plan demonstrates organizational commitment to the project.

**E. Application checklist (Be sure to include the following with your application packet):**

- 1 original signed application form including all attachments
- 9 photocopies** of application form with all attachments (collated)
- A** Proof of Organization’s Non-Profit status (see guidelines)
- B** Current list of board of directors, including affiliation, addresses, and phone numbers
- C** Previous year budget summary (Most recent **completed** fiscal year, audit statement from accountant; signed treasurer’s report; Highly recommended: Statement of Cash Flows, Income Statement and Balance Statement. **IRS form 990 will not be accepted.**)
- D** Current Budget (for year not yet completed)
- E** Resumes (Project Managers, Consultants, Technical Positions)
- F** Support Documentation (letters of commitment or contracts from consultants, other organizations, price quotes for services to be performed)

**F. PROJECT BUDGET (Jan 1-Dec. 31, 2012)**

PLEASE DOWNLOAD THE CAPACITY BUILDING 2012 BUDGET FORM AND COMPLETE THE “PROPOSAL – 2012 CBG BUDGET” FORM

**G. Project IN-KIND Contributions (Jan 1-Dec. 31, 2012)**

Do not include volunteer time as in-kind contribution, unless it is for professional services.

In-Kind contributions are *non-cash* contributions in the form of services, materials, goods, or space.

PLEASE DOWNLOAD THE CAPACITY BUILDING 2012 BUDGET FORM AND COMPLETE THE “PROPOSAL - IN-KIND GIFTS” FORM