

Name of Organization: _____

Contact Person: _____

Address: _____

Phone Number: _____

Email: _____

Name of Program/Project: _____

Grant Amount: _____ **Grant Date:** _____

Summary of the Grant Purpose: _____

Where you able to carry out the approved project activities? If not, please explain.

Project Activity

# of works of art created (include literary, performing, visual, and multi-disciplinary works. Was work original? <input type="checkbox"/> YES <input type="checkbox"/> NO	
# of fairs/festivals	
# of concerts/ performances/readings	
# of lectures/demonstrations/workshops/symposiums	
#of exhibitions curated/presented (include visual arts, media arts, film, film festivals, and design. Count each curated film festival as a single exhibition)	
# of hours that artists were in residence (artists' activities in schools or other settings)	

Individuals Benefited

<u>Individuals Compensated from the Project Budget</u> – enter the number of individuals (employees or contractors who were paid, in whole or in part, with funds from the final project budget.			NUMBER
Artists			
Teachers			
<i>Others (includes employees and temporary staff)</i>			
<u>Audience/Attendees/Participants/Learners</u> – enter the number of people reached through each method for this project.			
“LIVE” Arts Experience – number of individuals who visited a venue to engage with the arts.	Adults	Youth (under 18)	TOTAL
Volunteers	Adults	Youth (under 18)	TOTAL
Broadcast – TV, radio, cable, internet			
Distribution of Physical Materials – CDs, DVDs, Books			
GRAND TOTAL			

Population Descriptors – From each section, select the descriptor that best describes the primary population that benefited from the project during the period of support. These responses should refer to populations reached directly, rather than through broadcasts or online programming.

Race/Ethnicity:

- ☐ American Indian/Native American
- ☐ Asian
- ☐ Black/African American
- ☐ Hispanic/Latino
- ☐ White
- ☐ No Single Group

Age (range):

- ☐ Pre-Kindergarten (0-5)
- ☐ K12 (6-17)
- ☐ Young Adults (18-24)
- ☐ Adults (25-55)
- ☐ Seniors (55+)
- ☐ No Single Group

Community Type:

- ☐ Urban
- ☐ Rural
- ☐ Suburban
- ☐ No Single Group

Underserved/Distinct Groups:

- ☐ Individuals with Disabilities
- ☐ Individuals in institutions (include people living in hospitals, hospices, nursing homes, assisted care facilities, correctional facilities, and homeless shelters)
- ☐ Individuals with Low Income
- ☐ Individuals with Limited English Proficiency
- ☐ Military Veterans/Active Personnel
- ☐ None of the Above

Please list your organizational partners on this project and the nature of their involvement.

Please provide a summary on how funds were spent and list any additional financial partners and funding sources.

Beyond the project's direct accomplishments, what was the impact on – or benefit to – your organization, your discipline/field, and/or community?

Applicant Signature

Date

Print Name