

Application Form: Minigrant for Organizations

Check appropriate grant program under which you are applying:

Arts-Based Community Development Arts Industry Arts Education MS Heritage

1. Organization Name: _____ 2. County: _____
3. Address: _____ 4. City: _____ 5. Zip: _____
6. Phone: _____ 7. Fax: _____ 8. Website: _____
9. U.S. Congressional District #: ____ 10. Miss. Senate District #: ____ 11. Miss. House District #: ____
12. Year organization was founded: _____ 13. Incorporation date: _____
14. Federal employee ID#: ____ - _____
15. Project Director: _____ Title: _____
16. Project Director's Phone: _____ E-mail: _____
17. Authorizing Official: _____ Title: _____
18. Authorizing Official's Phone: _____ E-mail: _____
19. When will your project begin and end (*month/day/year*)? _____ to _____
20. Grant amount requested (*maximum request is \$1,000*): _____
21. Type of Project Activity: Presenting an Artist Organizational Development Conference
22. Provide details on your project in the space below. If you are:
- **Presenting an Artist:** Provide a description of the project, including the name of the artist (or group), the type of presentation, and a description of the intended audience. Please also note if the presentation is part of a bigger event or a stand-alone program.
 - **Organizational Development:** Provide the name of the consultant, a short description of the proposed consultancy, and what will be the intended outcome for your organization after the consultancy has been completed.
 - **Conference:** Provide the name of the conference, the name(s) of the staff or board members who will attend, and their position title(s). Please also provide a short explanation of why this conference was chosen and how attending the event will benefit your organization.

Please estimate the number of people who will take part in your project. Your estimate should include everyone who will participate, including attendees, volunteers, staff, and artists.

23. Total estimated number of people who will take part in activities supported by this grant: _____

24. Total estimated number of people under 18 who will take part: _____

25. How many people will be paid for work connected with these activities? _____
(For example: artist or consultant fees, the project director's salary, or other subcontractor fees)

26. How many of those who will be paid are artists? _____

27. Where will the activities take place?

Name of Facility: _____ City: _____

Name of Facility: _____ City: _____

28. Are the facilities accessible to persons with disabilities? Yes No*

29. Briefly explain how they are accessible:

30. Are the facilities accessible to the general public? Yes No*

*Please note: MAC funded activities must be accessible to the general public. Activities planned for private residences will receive low priority in funding decisions.

31. Please estimate, in percentages, the racial composition of the following groups:

	Actual Number	% White	% Native American	% African American	% Asian	% Hispanic	Total
Board							= 100 %
Staff							= 100 %
Artists Taking Part In All Activities							= 100 %
Total Taking Part In All Activities							= 100 %
Population of Your Community**							= 100 %

**Community is defined as the geographic area served by your organization. Check the U.S. Census Bureau's website (www.census.gov) to find the most recent estimate of your community's population.

32. Describe your organization's geographic area of service. Please be specific. Name the city, county, or multi-county region that your organization serves with its programs and services:

Project Budget: Minigrant for Organizations

The total in the Project Expenses “Cash Match” column must be equal to or greater than the “MAC Grant” column. MAC may request a budget itemization in order to clarify a project budget.

Project Expenses	Cash Match	MAC Grant	Total
1. Artist fees:			
2. Consultant fees:			
3. Staff travel to a conference:			
Registration			
Transportation & Lodging			
4. Total Cash Expenses (must not exceed income):			

Project Income	Cash	In-Kind*
1. Revenue:		
Admissions:		
Earned income:		
Other revenue (please specify)		
2. Private-sector support:		
3. Government support:		
Federal:		
County:		
Municipal:		
4. Applicant cash		
5. Subtotal**		
6. Grant funds requested:		
7. Total Income (must be equal to or greater than total cash expenses):		

* Defined as goods and services contributed by groups other than the applicant organization (for example, work done by volunteers or donated office space). Applicants **are not** required to demonstrate in-kind support. However, providing details on it will help the review panel get a better picture of the level of support for your project.

** Minigrants require a dollar-for-dollar cash match. Therefore, this figure must be equal to or greater than the grant amount you are requesting for your project. In-kind contributions **cannot** be counted towards your cash match.

Final Checklist: Minigrant for Organizations

Incomplete applications, defined as applications missing one or more of the documents listed below, **will not be considered for funding and will be returned to the applicant**. When you have completed your application, please check it off against this list and sign at the bottom.

Please submit one copy of each of the following:

- Minigrant for Organizations Application Form
- Budget itemization (if needed to show additional information on the project budget)
- Biographies (one half page maximum for each) of the key artistic and administrative personnel working on the project (paid and volunteer)
- A list of your organization's board of directors. Please indicate their ethnic make-up and members with disabilities
- If your organization is applying to MAC for the first time: a copy of your official IRS 501(c)3 determination letter. You do not need to send a copy of the letter if your organization has applied for a grant from MAC in the past three years. If you are unsure whether or not your organization has applied recently, please call and check with MAC Program Staff before submitting an application. Public schools, libraries and other agencies of local government are exempt from this requirement.
- Supporting information on the artist, consultant, or conference travel:
 - **Presenting an Artist:** If you are presenting an artist or group who is **not** on MAC's Roster, submit a copy of the cover page of the organization's roster of which the artist is a member, as well as the page featuring the artist. **No copies** are needed if the artist is on MAC's Roster, but please note that they are a member of the Roster in #22 on page one of the application.
 - **Organizational or Curriculum Development:**
 - a) the consultant's resumé and a list of their recent clients with contact information.
 - b) a one to two page narrative that includes:
 - a description of the organization's specific needs that will be addressed through the consultation
 - details of the project activities and the rationale for working with the proposed consultant.
 - the expected outcome(s) for the organization once the project is completed.
 - **Conference:** a complete conference brochure and registration form that shows the registration and related fees for the event. If travel funds are also being requested, please also include estimates from a travel agent or airline.
- A copy of the signed contract or a letter of agreement between your organization and the artist(s) or consultant(s)

I certify that the application form is complete and that the above-listed documents are attached.

Project Director's Signature

Date

Certification - Minigrant for Organizations

The authorizing official and project director certify that the information contained in the application, including all attachments and supporting material, is true and correct to the best of our knowledge. We certify that the applicant will comply with all general and specific guidelines and restrictions of the Mississippi Arts Commission and, when applicable, of the National Endowment for the Arts, including the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, Executive Order 12549, Fair Labor Standards, and the Drug Free Workplace Act of 1988.

Signature of Authorizing Official

Date

Authorizing Official's Name: _____ Title: _____

Signature of Project Director

Date

Project Director's Name: _____ Title: _____

Your application must be postmarked and in the mail no later than June 1 or November 1, 2012.

Please mail your application to:

**Mississippi Arts Commission
501 North West Street
Suite 1101A, Woolfolk Building
Jackson, MS 39201**