

Conduit – Artist Project Guidelines & Application 2006

The Twin Counties Cultural Fund is a joint project of the Columbia County Council on the Arts and the Greene County Council on the Arts. Through this fund, each county will regrant public funds from the New York State Council on the Arts (NYSCA) Decentralization Program to eligible not-for-profit organizations legally residing in either Columbia or Greene County.

Individual artists, or organizations that are not incorporated, can apply for project support through an established nonprofit organization that acts as the fiscal conduit. The project **MUST** strongly benefit the community. If the relationship is collaborative between the artist/group and organization, the artist/group needs to apply with the organization for the Project Support for Not-for-Profit Organizations.

**DEADLINE: Saturday, September 17, 2005 by 5:00 P.M.
NO LATE APPLICATIONS WILL BE ACCEPTED**

All applications must be postmarked or hand delivered to the appropriate Arts Council by 5:00 p.m. on Saturday, September 17, 2005.

- ❖ Columbia County Council on the Arts, 209 Warren Street, Hudson, NY 12534 (518) 671-6213
 - ❖ Greene County Council on the Arts, 398 Main Street, Catskill NY
- Mail: P. O. Box 463, Catskill, NY 12414 (518) 943-3400

Application Seminars

❖ All NEW applicants MUST attend a seminar. All RETURNING applicants who were NOT awarded MUST attend one of the seminars. All applicants must contact the DEC Coordinator prior to application. **Weekday seminars are from 6:00 P.M. to 8:00 P.M. except for Chatham which will be from 5:45 – 7:45. Saturday seminars are from 10:00 A.M. –12:00 noon.** Call the DEC Coordinator at (518) 943-3400 to register for a seminar.

Columbia County

Sat, July 30 – Columbia County Council on the Arts, 209 Warren St., Hudson.

Wed, Aug. 10 – Chatham Library
11 Woodbridge, Chatham

Thurs, Aug 18 – Roeliff Jansen Library,
2609 Rte23C, Hillsdale

Greene County

Thurs, July 28 – Windham Library,
Intersection Main & Church, Windham

Tues, Aug 9 – Athens Cultural Arts Center
Second Street, Athens

Sat, Aug. 13 – Greenville Library
Rte 32, Greenville

ELIGIBILITY CRITERIA - All applicants MUST meet all of the following criteria.

Artist

- Artist MUST reside in Greene or Columbia County.
- Projects MUST be open to the public.
- Projects do not duplicate existing programs in the same area.
- The applicant's programs or projects MUST take place in their county during the 2005 calendar year.
- Projects must directly and primarily involve their local communities.
- Programs and services MUST benefit the residents of your respective county.

Conduit

- A legally established not-for-profit organization based in the same county as the artist, whose assets do not benefit private individuals.
- The conduit has an active Board of Directors or other volunteer group actively guiding the organization's policies.
- Demonstration of sound managerial and fiscal competence.

Artist and Conduit

- The applicant's programming, administrative practice, and board membership do not discriminate on the basis of race, color, national origin, sex or handicap (Also see: 1991 Americans with Disabilities Act).

Funding CANNOT be provided for:

- Organizations applying directly to the New York State Council on the Arts, regardless of the application's status.
- Past grantees that have failed to submit a final report to the DEC Coordinator.
- Public school districts, their affiliates or components, or activities which exclusively serve a student audience with no public component.
- Four-year public universities and colleges.
- New York State agencies and departments.

Restrictions - These grant moneys may not be used for the following:

- Equipment or capital expenditures.
- Expenditures for the establishment of a new organization.
- Operating expenses.
- Scholarships or fellowships
- Cultural or art activities restricted to an organization's membership.
- Programs that are recreational, rehabilitative or therapeutic.
- Operating expenses of privately owned facilities (e.g. homes and studios).
- Budget requests that are greater than the applicant organization's projects total expense minus the project income.
- Entertainment costs (e.g. theater parties, museum opening, receptions, fund raising, awards, etc.).

PANEL REVIEW CRITERIA

DEC funds are intended primarily to support artists fees. A diverse panel of artists, art professionals and educators, and local civic, business and community leaders will review applications. The Panel will examine each application and accompanying materials, and will recommend funding based upon the following criteria:

- Benefit to the community.
- Artistic quality and/or cultural merit of the proposed project.
- Credentials of artists or scholars involved in the project.
- History and stability of the applicants.
- Demonstrated need for funding and budget appropriateness.
- Clarity and conciseness of program narrative, project description and project budget.
- Demonstrated community interest and/or constituent support, i.e. increased community access and participation in arts and cultural activities and accessibility to the general public.
- Applicants who present "under exposed" art forms, thereby exposing their community to a more global sense of art.
- Applicants who provide cultural services and opportunities to segments of Greene or Columbia County's residential population which have had relatively little exposure to them in the past
- The quality and completeness of your support materials.
- Information contained on final reports, audits, and correspondence between DEC Coordinator and awardee relating to previous DEC awards.
- **ALL OF THE ELIGIBILITY CRITERIA** (referenced on page 2).

APPEALS

Applicants should first consult with the DEC Coordinator to review the considerations that went into the Panel's decision. If, after such a consultation, the applicant wishes to pursue an appeal, you must do so in writing, with all your material supporting the appeal, to the Executive Director of your respective Arts Council. The Executive Director must **RECEIVE** the appeal within fifteen (15) calendar days after the issue date of the denial letter. The applicant will receive a written response and the appeal will be assigned to a different panel. They will meet to examine the grounds for the appeal and provide a recommendation to the Council's Board of Directors for final approval.

THE ONLY GROUNDS FOR APPEALS ARE:

- Non-representation of material information by staff or panelists
- Misrepresentation of material information by staff or panelists
- Improper procedure by staff or panelists

Dissatisfaction with the amount of support the recommendation of no funding cannot be used as the basis for appeal. Failure to meet any deadline date in the appeals process results in the loss of the right to appeal.

REVIEW PROCEDURES AND TIME LINE

Application Deadline:	Saturday, September 17, 2005 by 5:00 p.m.
DEC Coordinator reviews submitted applications & support materials for completeness	Sept-October 2005
Panel begins initial review of applicant's material	October 2005
DEC Coordinator will contact any applicant if the panel requires additional information	October 2005
Panel meets to make funding recommendations	November 2005
Panel submits recommendations each county's Board of Directors	December 2005
Written notification of the panel decision to all applicants	January 2006
Any appeals will be considered (See Appeals section)	January 2006
Revised Budgets submitted for projects that were awarded substantially less funding than requested	January 2006
Contracts will be mailed to grant recipients	February 2006
Awards Ceremony for grant recipients	March/April 2006

CONDUIT - ARTIST PROJECT APPLICATION

Submission of one DEC application per year though there may be up to three separate program requests within the application. Multiple components should be combined to constitute a SINGLE application. Request amount may not exceed \$5,000. **Please type or print very clearly.**

ARTIST INFORMATION

Artist/Group Name	Project Coordinator for the Group
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Street Address, City and Zip Code

Mailing Address, City and Zip Code (if different from above)

Telephone (day, evening, fax)

Social Security Number

E-mail

CONDUIT INFORMATION

Applicant Organization's Legal Name

AKA (also known as)

Mailing Address

City

State

Zip Code

Organization's Web site and e-mail address

Organization's Telephone Number and Fax

Contact Name & Title

Contact Phone (day, eve and fax)

Contact's e-mail

Chairman/President Board of Directors

Treasurer/Fiscal Officer

Organization's Fiscal year

Incorporation Date

NYS Assembly District

NYS Senate District

US Congress District

CONDUIT—ARTIST PROJECT SUPPORT REQUEST SUMMARY

1. Request to Decentralization \$ _____

2. Proposed project will consist of:
(what) _____

and will take place at

for (whom)

_____.

Dec Funds will be used to support

_____ aspect/s of your project.

(Keep in mind that DEC funds are primarily intended to support artists fees)

PROJECT CATEGORY (Check one)

- Music
- Theater
- Dance
- Storytelling
- Visual Arts
- Media Arts
- Literature
- Multidisciplinary

PRIMARY AUDIENCE

- Children K – 3rd grade
- Children 4th – 8th grade
- Teens
- Adults
- Elders

PROJECT COMPONENTS

- Workshop
- Performance
- Lecture
- Other (Please specify)

CONDUIT - ARTIST PROJECT APPLICATION

CONDUIT INFORMATION

Have you ever applied directly or received funding from the New York State Council on the Arts?

YES: _____

NO: _____

If yes, what year(s) did you apply and receive: _____

Have you ever received funding from the Columbia or Greene County Council on the Arts?

YES: _____ NO: _____ If yes, please supply the following information:

Award Year

Award Amt

Program Funded

ARTIST INFORMATION

Have you ever received funding from the Columbia or Greene County Council on the Arts?

YES: _____ NO: _____ If yes, please supply the following information:

Award Year

Award Amt

Program Funded

Briefly describe the purpose and activities of your organization:

PROJECT SUPPORT FOR CONDUIT - ARTIST APPLICATION

PROJECT INFORMATION

Project Title: _____

Estimated Number of People Benefitting:

Artists _____ Youth _____ Other Individuals _____

Is this program site accessible to the physically challenged? YES: _____ NO: _____

- **IF your presentation will not take place at the conduit facility, please include a letter of confirmation from the facility where it WILL occur that references the date, time, etc. of your presentation/program.**

ARTIST PROJECT DESCRIPTION

Please give a complete description of project for which funds are being requested. Please be brief and concise. Your project will be evaluated heavily on the basis of this narrative. You may add up to one additional page.

PROJECT SUPPORT FOR CONDUIT - ARTIST APPLICATION

PROJECT BUDGET INSTRUCTIONS

We suggest you write out ALL of your individual project expenses and income in detail and in your own format on a separate page. Include this document with your application. Once you have identified all your project's income and expenses, translate those items to fit in the budget format referenced on page 10. Round off all figures to the nearest dollar.

INCOME - Include any revenue or projected revenue that will be applied to this project.

Earned: Separately explain each source of income such as: admissions - ticket sales. Tuition/workshop fees. Fundraising gross income and advertising, sales and concessions.

Unearned: Separately explain each source of expected income from corporations and businesses, foundations, individual and private contributions (cash donations, etc.), state (this cannot be NYSCA money), local government - include any other contributions from county or municipal governments and specify, other such sources of unearned income like interest. Do not include the amount you are requesting or have received from this regrant program.

EXPENSES - Include all expenses directly related to this project

Organizational Personnel: This is an organization's salaried and hourly employees. Enter payments for salaries, wages and benefits of administrative and artistic staff, program directors and other staff such as technical or production as it relates to this project, if applicable.

Outside Professionals: Enter payments here to firms or persons who are NOT employees of the organization, but whose services are specifically related to the project. **Artists** line should include payments and fees to yourself and other artists working in the project. **Other** line should include non-artist consultant fees and honorarium.

Space Rental: Office, rehearsal, theater, gallery, etc.

Travel: Enter all costs for project related travel including toll charges, mileage allowances on personal vehicles, hotel and other lodging expenses, food, taxis, gratuities, per diem payments, car rental costs, etc.

Promotion/Marketing/Advertising: Include all costs for marketing, publicity and promotion specifically identified with the project. Do not include payments to individual or firms that belong under "Personnel" or "Outside Professionals Fees & Services." Include costs of newspaper, radio and television ads, printing and mailing of brochures, flyers, and posters. Itemize each category separately.

Remaining Operating: Include all expenses not entered in other categories, such as electricity, telephone, postage, office and art supplies, sets, props, equipment rental, insurance fees, etc. Itemize each category separately.

CONDUIT - ARTIST PROJECT APPLICATION

ARTIST PROJECT BUDGET INFORMATION

PROJECT BUDGET: Request amount may **NOT** exceed \$5,000.00. Itemize/describe all project expenses and income on no more than one page in your format and attach with this application. Complete the budget format below after you have identified your project income and expenses. Do not list In-Kind Contributions in the budget. See In-Kind section below.

INCOME

EARNED

Admissions _____
 Memberships _____
 Contractual Services _____
 Tuition/Workshop Fees _____
 Advertising & Sales _____
 Other _____

SUBTOTAL EARNED \$ _____ (a)

UNEARNED

Corporate/Business _____
 Foundations _____
 Individual Contributions _____
 Federal (specify) _____
 State (specify) _____
 Local Govt. (specify) _____
 Other (specify) _____

SUBTOTAL UNEARNED \$ _____ (b)

TOTAL INCOME (a+b=c) \$ _____ (c)

EXPENSES

ORGANIZATIONAL PERSONNEL

Administrative _____
 Artistic _____
 Other _____

OUTSIDE PROFESSIONALS

Artists _____
 Other _____

OTHER EXPENSES

Space Rental _____
 Travel _____
 Promotion _____
 Remaining Operating _____
 Supplies & Materials _____

TOTAL EXPENSES \$ _____ (d)

REQUEST TO DECENTRALIZATION: Total Expenses minus Total Income equals request.
 Request cannot exceed \$5,000 (d - c = e) \$ _____ (e)

In-Kind Contributions

On no more than one sheet of paper, list all in-kind contributions by donator, type of donation and estimated value.

Total Estimated Value of In-Kind Contributions: _____

APPLICATION CHECK LIST AND SUPPORT MATERIAL

The quality, clarity and completeness of your application and support material are criteria in the review panel's determination of awards. Please make sure to submit the following along with your completed application form. (Check items submitted)

SUBMITTED BY THE CONDUIT ORGANIZATION:

_____ Evidence of the not-for-profit status in ONE of the following forms with two (2) copies:

An IRS letter of tax-exempt status, 501 (c) (3) **OR**

A copy of the organization's latest receipt from the Department of State Office of Charities Registration, section 172 of the Executive Law. To receive the form, contact the Office of Charities Registration, Department of State, 162 Washington Avenue, Albany, NY. **OR**

A copy of the Charter issued by the Board of Regents of the State of New York under Section 216 of the Education Law. **OR**

Official authorization as an arm of local government such as submission of a letter on formal stationery signed by the appropriate county, city, town or village executive . **OR**

Acceptance of incorporation section 402 of the Not-for-Profit Law.

_____ List of the Board of Directors and current staff (paid and/or volunteer)

_____ Resumes of the principal administrators

_____ Financial statement for the most recently completed fiscal year

SUBMITTED BY THE ARTIST/GROUP:

_____ Professional resume

_____ Proof of Greene or Columbia County residency (i.e. tax document, utility bill, etc.)

_____ At least ONE letter of support for the applicant from an individual or organization that has a professional relationship with the applicant.

_____ Letter of confirmation from the performance project facility if different from the conduit.

_____ A publicity package containing no more than a combined total of four (4) of the following items: brochure, program, press clipping, catalog, postcard or any other related printed material.

_____ Attendance to the Application Seminar for all new and returning applicants who were NOT funded.

_____ A self-addressed envelope with sufficient postage IF you desire the return of your supplemental materials.

_____ Supplemental materials:

One (1) videotape cued for 3-5 minutes for viewing . **OR**

One (1) or audio tape cued for 3-5 minutes for listening. **OR**

Eight (8) photographs, color computer scans or slides. Label each with the artist's name, title, materials, size and year of creation. (Indicate top and front) **OR**

For Literature: three to five (3-5) pages of writing samples with the option of audio cued for 1-3 minutes of a taped reading of your writing.

_____ The videotape, CD, audio tape, photos, color computer scans, writing samples, or slides must be accompanied by a one page script that lists project name, artist's name, very brief project description and year of project .

_____ FOR GROUPS: Financial statement for the most recently completed fiscal year

SUBMITTED BY BOTH THE ARTIST AND THE CONDUIT ORGANIZATION:

_____ Original complete signed application and all support material.

_____ Letter of agreement delineating responsibilities and payment schedule between the artist and the conduit.

CERTIFICATION: The undersigned certifies that he/she (1) is a principal officer or agent of the applicant with authority to obligate it; (2) has knowledge of the information presented herein and the information referenced on this application is truthful; (3) has read the guidelines of the Twin Counties Cultural Fund herein by reference, and that this application complies with, and is made subject to said guidelines; (4) releases the Columbia County Council on the Arts and the Greene County Council on the Arts, its employees and agents with respect to damages to property or material submitted in connection herewith.

Organization's Legal Name: _____

Signature of Principal Officer: _____

Title: _____ **Date:** _____

Artist's Signature: _____ **Date:** _____

OR

Project Coordinator's
Signature: _____ **Date:** _____

NOTE: An **UNSIGNED** application is considered **INCOMPLETE** and is not eligible to be reviewed. Please be careful to complete and sign your application before you submit it for review.