

# ACHF Organization Grant Feb 1, 2018 deadline

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*East Central Regional Arts Council*

## Section 1: Organization Information

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### **Project Director:\***

*Character Limit: 250*

### **Title\***

*Character Limit: 250*

### **Project Director Email Address\***

*Character Limit: 250*

### **Project Director Phone Number (day):\***

*Character Limit: 250*

### **Grant Writer:\***

*Character Limit: 250*

### **Title\***

*Character Limit: 250*

### **Our group/organization:**

Has no overdue or unacceptable past reports with ECRAC.\*

#### **Choices**

- Yes
- No

Is incorporated as a nonprofit, or has an official fiscal agent agreement with a nonprofit, unit of government, or independent school district.\*

#### **Choices**

- Yes
- No

### **Tax Determination Letter**

Copy of IRS letter documenting your group's 501c3 tax-exempt status.

*File Size Limit: 2 MB*

Is located in and serves the counties of Chisago, Kanabec, Isanti, Mille Lacs or Pine. \*

#### **Choices**

- Yes

No

## Section 2: ECRAC/ACHF Certification

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### **Certification\***

Download, read, and complete the ECRAC/ACHF Certification. Upload the signed document here.

FYI - Two separate signers are required. One signer must be an authorizing officer of the board or the fiscal agent organization. The other signer must be the project director.

*File Size Limit: 2 MB*

### **Date of attendance at ECRAC grant information session.**

This is optional but highly recommended.

*Character Limit: 10*

**FYI - To ensure all application files have uploaded and will open properly for reviewers, applicants should use the "Application Packet" button located at the top of the application. Any file upload error messages will appear on the "File Attachment Summary" page in the Application Packet.**

**Contact staff via email at [info@ecrac.org](mailto:info@ecrac.org) or by telephone at 320-396-2337 if you have any questions or concerns regarding your application. If requested early enough in advance of the grant deadline ECRAC staff can review your draft application.**

## Section 3: Project Summary Information

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### **Grant Project Title\***

*Character Limit: 100*

### **Brief Project Description:\***

*Character Limit: 750*

### **Project Start Date:\***

See Grant Guidelines, page 12, for start and end date requirements.

*Character Limit: 10*

### **Project End Date:\***

*Character Limit: 10*

### **Grant Amount Requested - \$5,000 to \$15,000\***

From your completed Project Expense Template in Section 10.

*Character Limit: 20*

**Total Project Cost\***

From your completed Project Expense Template in Section 10.

*Character Limit: 20*

***Section 4: Fiscal Agent Information, If Applicable***

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**Organization's Fiscal agent's IRS Letter of Determination of tax-exempt status.**

Unless a local unit of government or Independent School District you **must** attach a copy of either your organization's or your fiscal agent's IRS Letter of Determination of 501c3 tax-exempt status.

*File Size Limit: 3 MB*

**(If your group is not using a fiscal agent, the following section will be blank.)**

**Fiscal Agent Organization Name:**

*Character Limit: 250*

**Mailing address:**

*Character Limit: 250*

**City:**

*Character Limit: 250*

**State:**

*Character Limit: 50*

**Zip Code:**

*Character Limit: 250*

**Contact Person:**

(Must be an authorizing official of organization)

*Character Limit: 250*

**Contact Person Title:**

*Character Limit: 250*

**Contact Person Phone Number (day):**

*Character Limit: 250*

**Contact Person Email Address:**

*Character Limit: 250*

**Fiscal Agent Tax Exempt Number (EIN):***Character Limit: 250*

## *Section 5: Arts and Cultural Heritage Fund Investment Evaluation*

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**Detailed Project Summary\***

Include descriptions of all activities involved in completing the project:

- date(s),
- location(s),
- workshops or other training,
- number of performances,
- names of staff, artists or companies,
- your required open to the public event,
- any other information that will help the Arts Council understand your project,
- and define your community served.

Keep in mind that the Arts and Cultural Heritage Funds can only support activities that address the three key areas of: Arts and Arts Access, Arts Education, and Arts and Cultural Heritage. Refer to the definitions in the ACHF Grant Guidelines for further detail.

*Character Limit: 5000***Your answers to the following questions will be used to evaluate the impact of your project.****How does this project instill the arts into your community and public life?\****Character Limit: 1200***How does this project provide a high quality arts experience?\****Character Limit: 1200***How does this project give access in Region 7E to a quality arts experience?\****Character Limit: 1200***How does this project help to develop knowledge, skills, and understanding of the arts?\****Character Limit: 1200***How does this project help to represent diverse ethnic and cultural arts traditions?**

Optional answer - not applicable if not part of your proposal.

*Character Limit: 1200*

### **Do the artist résumés and any work samples submitted substantiate the artistic merit and quality?\***

*Character Limit: 1200*

### **Is your project's venue publicly accessible and ADA compliant?\***

*Character Limit: 1200*

### **Artistic Merit\***

All ACHF grants must have a heightened sense of artistic merit. Explain how your project will expand both your organization's artistic capabilities and the artistic experiences of your audience.

*Character Limit: 1200*

## *Section 6: Arts and Cultural Heritage Fund Publicity Description*

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### **Promotion and Publicity Plan\***

Detail here how your organization will provide promotion and publicity for the project. Include specific media and costs.

*Character Limit: 3000*

## *Section 7: Organizational Ability*

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### **What year was your organization started?\***

*Character Limit: 10*

### **Explain how your organization is staffed.\***

*Character Limit: 450*

### **Summarize the qualifications of the Project Director.\***

Attach Project Director résumé.

*Character Limit: 450 | File Size Limit: 2 MB*

### **Describe the governing body of your organization.\***

Attach supporting information on board members and include their mailing addresses.

*Character Limit: 450 | File Size Limit: 2 MB*

### **Describe the project planning process and who was involved.**

Attache résumés of any key project personnel. Combine all document into one file, if needed.

*Character Limit: 450 | File Size Limit: 2 MB*

## If applicable, why did you select the artist(s) or artist companies participating in this project?

Attach artistic résumés and all supporting materials. Combine all documents into one file to upload.

*Character Limit: 450 | File Size Limit: 3 MB*

## List any projects your organization has completed in the past three years.\*

*Character Limit: 400*

## List all ECRAC funded projects your organization has had in the past three years.\*

Include the year and the amount funded.

*Character Limit: 2000*

## Section 8: Outcome Evaluation

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### Outcome Evaluation

Funding for this program comes from the Arts and Cultural Heritage Fund, a fund created by the people of Minnesota to support the arts. Outcome evaluation is a legislatively required part of all ACHF grant funding proposals.

### You must include outcome evaluation costs in your budget expenses.

Refer to the **Grant Guidelines** on pages 18-20.

Describe which of the following best describe the majority of the people you plan to serve with this project:\*

#### Choices

Young children

School age children

Teens or youth

Adults – general public

Adults – professionals or peers

Adults – artists

Adults – learners

Adults – seniors or elders

Inter-generational groups (e.g., families)

Communities (e.g., neighborhoods or cities)

Organizations

People in institutional settings

People who might have difficulty communicating (e.g., reading, writing, or speaking)

People who may have sensory difficulties (e.g., vision or hearing)

People who may have mobility difficulties  
 People who may have cognitive difficulties

Sometimes thinking about different kinds of possible changes or effects can help us connect a grantmaker's very broad program outcomes to your own, specific outcomes for your project. Which of these broad areas best describes the kind of change you expect from your project?\*

### Choices

Artists and the arts are visible in communities  
 Artists develop their practice  
 Organizations develop capacities that advance the arts  
 People access arts experiences  
 People develop arts skills or knowledge  
 People have meaningful arts experiences  
 People make connections to ideas, organizations, or one another

Having a specific outcome in mind means that the people you serve are supposed to be different in some way as a result of this project. What kinds of specific changes do you expect to see in the people to be served by this project?\*

### Choices

An emotional response or reaction  
 A changed attitude about something or someone  
 A new awareness about something or someone  
 A new intention or motivation to take some course of action  
 A changed perception of themselves or others  
 A new or expanded understanding or knowledge about some topic  
 A new or expanded skill in some area  
 A change to their behavior after this experience  
 Changes to their relationships with someone else: new, strengthened, or enriched  
 Your organization will have a new or improved ability or capacity to do something  
 A change to some other condition eg, individual well-being, community strength, etc

## **Outcome Measurement**

There are many ways to measure the results of projects; for example, collecting verbal or written stories and comments, surveys, focus groups, and interviews. For the visual arts, exhibit guest books are often used to capture comments. For the performing arts, attendance numbers or audience surveys may be useful. Comments/Critiques by peers can also be a way to assess the impact of your work. ECRAC staff has samples of outcome evaluations. Schedule an appointment with staff if this will assist you in your proposal.

## **Outcome Measurement\***

What kinds of data or information will you gather?

- Quantitative: numbers or categories of things used to look for outcomes by rating, totaling, or comparing.

- Qualitative: observations or narratives used without any pre-determined categories of information to look for outcomes as they emerged from an experience or discussion.
- Both: a combination of both quantitative and qualitative information.

### Choices

Quantitative

Qualitative

Both Quantitative and Qualitative

### Outcome Evaluation Method Types\*

What kinds of methods do you anticipate using to document progress toward your project outcomes? Please note that the term stakeholder suggests the people data is gathered from and could be participant, audiences, community members, artists, project partners or organization staff. It depends on the project being proposed.

### Choices

Reviewing program statistics or other documents related to the project

Reviewing or critiquing a portfolio, experience, or other artifacts of the project

Conducting interviews with stakeholders

Conducting focus groups with stakeholders

Creating one or more case studies about the project

Making structured observations of stakeholders during project activities

Surveying stakeholders about their knowledge skills, attitudes, behaviors, or motivations

Gauging stakeholder priorities using interactive methods such as sorting cards or voting

Having stakeholders describe or capture their own impressions

## Section 9: Project Budget

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### Submit your organization's current year annual budget as a supplement to this project's budget.\*

*File Size Limit: 7 MB*

### Yearly 990 or Audit Report\*

Submit a copy of your organization's yearly 990 or audit report (if applicable and once per year.)

*File Size Limit: 7 MB*

### Project Expenses\*

<https://app.box.com/s/frn9vrj9kjom01y8im3d47aanyo8xag6> Please download, complete and upload the Project Expense Template below.

*File Size Limit: 2 MB*

### Project Expense Details and Explanations\*

Include the written project expense details and explanations for each of your budget line items here.

*Character Limit: 1500*



### Price Quote 1

*File Size Limit: 2 MB*

### Price Quote 2

*File Size Limit: 2 MB*

### Price Quote 3

*File Size Limit: 2 MB*

### Project Income\*

Please download, complete and upload the Project Income Template below.

*File Size Limit: 2 MB*

### Project Income Details and Explanations\*

Include the written project income details and explanations for each of your budget line items here.

*Character Limit: 1500*

### Amount of ECRAC/ACHF Grant Request:\*

This should be the same amount as requested in the project summary information section 3.

*Character Limit: 20*

## Section 10: Regional Arts Council Data Collection

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### Regional Arts Council Grant Data Collection\*

These reporting fields are not used in the evaluation of your grant request and are simply used for data collection purposes.

#### Choices

I understand

### Are you a new applicant?\*

#### Choices

Yes

No

### County\*

Choose the county below in which your organization is located.

#### Choices

Chisago

Isanti

Kanabec

Mille Lacs

Pine

### **MN House District\***

MN legislative house district where the applicant is located (Click Here to use the district poll finder).

**Due to redistricting be sure to check Poll Finder for the correct House District**

#### **Choices**

11B  
15A  
31A  
32A  
32B  
39A

### **Congressional District\***

U.S. congressional district where the applicant is located. To be eligible to apply you must live within the five county East Central Minnesota Region which is congressional district 8.

#### **Choices**

8

### **Special Characteristics (optional)**

**For Organizations:** select the one code that best represents 50% or more of your staff, board, or membership.

#### **Choices**

D Individuals with Disabilities  
I Individuals in Institutions  
P Individuals below the Poverty Line  
E Individuals with limited English Proficiency  
M Military Veterans/Active Duty Personnel  
Y Youth at Risk  
G No single distinct group makes up more than 25% of the population served  
5 Pre-K, children 5 and under  
99 None of the Above

### **Race/Ethnicity (optional)**

**For Organizations:** Please select the option that best represents 50% or more of your staff or board or membership.

#### **Choices**

N American Indian/Alaskan Native  
A Asian  
P Native Hawaiian/Pacific Islander  
B Black/African American  
H Hispanic/Latino  
M Middle Eastern/North African

W White  
99 when no single group applies  
O Other

### Age Group

Select the categories that best represent the age of those benefiting from your project.

#### Choices

- 1 Children/Youth (0 - 18 years)
- 2 Young Adults (19 - 24 years)
- 3 Adults (25 - 64 years)
- 4 Older Adults (65 + years)
- 9 No single age group

### Status\*

Select the one code that best describes the applicant. [Click Here](#) for a list of current **Status** codes. Example, enter "08" for Museum - Art.

#### Choices

- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09
- 99

### Institution\*

Select the one code that best describes the applicant. [Click Here](#) for a list of current **Institution** codes. Example, enter "08" for Museum - Art.

#### Choices

- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09
- 10
- 11
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- 51
- 99

**Discipline\***

Select one code that best describes the applicant's primary area of interest in the arts. Click [Here](#) for a list of current **Discipline** codes. Example, enter "01A" for Dance, ballet.

**Choices**

- 01
- 01A
- 01B
- 01C
- 02

- 02A
- 02B
- 02C
- 02D
- 02E
- 02F
- 02G
- 02H
- 02I
- 03
- 03A
- 03B
- 04
- 04A
- 04B
- 04C
- 04D
- 04E
- 05
- 05A
- 05B
- 05D
- 05F
- 06
- 06A
- 06B
- 06D
- 06E
- 06F
- 06G
- 07
- 07A
- 07B
- 07C
- 07D
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- 07F
- 07G
- 07H
- 07I
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- 09
- 09A
- 09B
- 09C
- 09D
- 09E
- 10
- 10A

- 10B
- 10C
- 10D
- 11
- 12A
- 12B
- 12C
- 12D
- 13
- 14
- 15

### **Project Discipline\***

Select one category that best describes the proposed project activity. [Click Here](#) for a list of current Discipline codes.

#### **Choices**

- 01
- 01A
- 01B
- 01C
- 02
- 02A
- 02B
- 02C
- 02D
- 02E
- 02F
- 02G
- 02H
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- 12D
- 13
- 14
- 15

**Does your proposed project involve a public event?\***

**Choices**

Yes

No

**Date(s) of the open to the public event(s).\***

Enter all individual event dates separated by a comma.

*Character Limit: 250*

**If yes, include the name(s) and address(es) of the event location(s).\***

*Character Limit: 250*

**Adult Artists Participating\***

Estimated number of adult artists directly involved in or providing art or artistic services specifically identified with grant activities.

*Character Limit: 10*

**Children/Youth Benefiting\***

Estimated number of children and youth under the age of 18 participating in and/or benefiting directly from these grant activities, or included in an audience.

*Character Limit: 10*

**Adult Audience Benefiting\***

Estimated number of adult audience participants benefiting directly from grant activities.

*Character Limit: 10*

**Total Organization Expenses\***

List the total organization expenses for the most recently completed fiscal year.

*Character Limit: 20*

**Organization's Total Arts Budget for Previous Fiscal Year:\***

Or Department Budget if you are at a school or unit of Government.

*Character Limit: 20*

**Total Project Expenses\***

*Character Limit: 20*

**Cash Expense of Project\***

This number should be the project total cost minus the amount of any in-kind revenue listed in your budget.

*Character Limit: 20*

**Full Time Equivalents (FTE) to be funded:\***

*Character Limit: 10*

**Project In-Kind\***

This number should be the amount of any in-kind revenue listed in your budget.

*Character Limit: 20*

**Start Date\***

The starting date should be approximately one month before your project is to take place or before you have to contract for services. *(This date **cannot** be before the grant deadline's earliest possible starting date listed in the guidelines.)*

*Character Limit: 10*



### **End Date\***

The ending date should be approximately one month after the actual completion date of your project to allow time to close out all aspects of the project before submitting your final report.

*Character Limit: 10*

### **Counties Impacted\***

Please provide a list of counties (Minnesota only) that will be impacted by this project.

*Character Limit: 500*

### **Board Members\***

Please provide a list of Board Members. Enter first and last name only, separated by commas.

*Character Limit: 1000*

**Contact staff via email at [info@ecrac.org](mailto:info@ecrac.org) or by telephone at 320-396-2337 if you have any questions or concerns regarding your application. If requested early enough in advance of the grant deadline, ECRAC staff can review your draft application.**

**Thank you for applying! ECRAC staff wishes you all the best.**

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