



# FORSYTH COUNTY ARTS ALLIANCE

*Supporting the Arts*

## **Grant Application Form 2020**

**Please submit (by email) one completed copy of this form, along with the requested narrative and attachments, to the Forsyth County Arts Alliance, by Friday, May 8, 2020.**

**Email to FCAA Executive Director, Ahna Phillips: [info@forsythartsalliance.com](mailto:info@forsythartsalliance.com)  
You will receive an email reply confirming receipt of your application.**

**Organization Name:**

**Contact Person and Title:**

**Mailing address:**

**Phone number(s):**

**Contact email address:**

**Organization website:**

**Title of Project, Program, or Event for which funds are being requested:**

**Total Project, Program, or Event Budget: \$**

**Total Amount of Request for FCAA Funding: \$**

**What will the requested FCAA funding purchase? Be specific:**

**Project, Program, or Event Category (more than one may be selected):**

Arts Education

Literary Arts

Visual Arts

Arts Festival

Media/Design

Other (describe):

Culture/Heritage/History

Performing Arts

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**Proposed Date(s), if applicable:**

**Target audience and number of people to benefit:**

**Location(s) of Project, Program, or Event:**

**Ticket or admission price(s), if applicable:**

**Does this project, program, or event require publicity and, if so, how do you intend to publicize it?**

**How do you intend to credit/publicize FCAA support for the project, program, or event?  
(Please note that the FCAA will provide grant award recipients with official FCAA logo files.)**

**Other sources of income for this project, program, or event:**

<u>Source</u>	<u>Amount (\$)</u>	<u>Please indicate one:</u>	
		<b>Confirmed</b>	<b>Requested</b>
		<b>Confirmed</b>	<b>Requested</b>
		<b>Confirmed</b>	<b>Requested</b>

**Please type separately and include:**

1. 1 – 2 page (2 page max. no smaller than 11 pt. font) single-spaced Proposal Narrative, describing:
  - a. Organizational goals and mission
  - b. Project, program, or event for which you are requesting funds
  - c. Qualifications and background for providing this project, program, or event, including those for collaborating providers
  - d. Timeline for implementation
  - e. Statement of collaborative partnerships, volunteer involvement, and/or in-kind contributions
  - f. How this project, program, or event will benefit the residents of Forsyth County, Georgia, and meet the mission of the FCAA (stated elsewhere in grant information materials)
2. Current budget for organization AND/OR project, program, or event, including list/statement of major contributors (names of individuals not necessary) and amounts given
3. Most recent year-end financial statements
4. List of the Board of Directors for your organization, including names and occupations and/or community affiliations
5. Copy of IRS 501(c)(3) Letter of Determination (or, in the case of government, letter stating that signature is provided by an employee of the applicant organization)
6. For non-governmental organizations, copy of most recent Form 990
7. Letter(s) of commitment from any significant project partner(s)
8. Any additional support material that specifically addresses the artistic merit of your proposal
9. Has your organization’s financial health changed as the result of the economic challenges of the COVID-19 pandemic? If yes, please provide additional information regarding this change.
10. If applicable, what is your contingency plan, if any, for your performance / event in case of health advisories around public gatherings? *This is for FCAA informational purposes only and will not be used as part of the judging criteria.*

**By signing below, I declare that I am authorized to make this application and assure that any funds received as a result of this application will be used only for the purposes stated. I certify that the information contained in this application and its attachments are, to the best of my knowledge, true and accurate.**

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**Typed Name and Title (Executive Director, Project Director, or similar)**

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**Signature (Executive Director or similar)**

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**Date**

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**Typed Name and Title (Board Chair or similar)**

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**Signature (Board Chair or similar)**

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**Date**

*The Forsyth County Arts Alliance is a Fund of the North Georgia Community Foundation.*