

SCP Individual Artist Application

Summary/Application Wizard

1. Please describe the applicant:

- Individual (SCP – Artist Projects, Artist Performances on Tour or Teaching Artists only)
- Organization (GPS or SCP)

2. Select one: (Individual)

- Artist Projects – Florida-based practicing professional artists creating and/or presenting original works of art.
- Artist Performances on Tour—Florida-based performing artists offering touring activities to underserved communities
- Teaching Artists – Florida-based practicing professional artists providing arts integration in underserved communities.

3. Please select the statement that best describes the purpose of your project: (SCP)

- Promote arts and culture in education (Arts in Education)
- Conducting, creating, producing, staging, or presenting a cultural exhibit, performance, educational program, or event (Discipline-Based)

4. Please select the type of Arts in Education you are requesting funding for? (AIE)

- Artist Performances on Tour - provides funding to Florida-based performing artists for touring activities to underserved communities; touring activities include both a performance and an educational component.
- Teaching Artists - provides funding to Florida-based artists providing educational services in Florida public schools.

Select your discipline

- Dance
- Traditional Arts
- Literature
- Media Arts
- Multidisciplinary
- Museum
- Music
- Presenter
- Theatre (Community)
- Theatre (Professional)
- Visual Arts

5. Proposal Title _____

A – Contacts (Applicant Information)

<p><Display applicant information read only></p> <ul style="list-style-type: none">a. Applicant Name (org or individual)b. DBAc. FEIDd. Phone number (with extension if applicable)e. Principal Addressf. Mailing Addressg. Websiteh. Org Type (e.g. non-profit, school board, etc.)i. Org Category (e.g. public library, SOE, etc.)j. Countyk.
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1. Grant Contact

The Grant Contact is the primary contact for your grant. This is the person that will be contacted if there are any issues with your application. The contact may be different from the authorizing official who is typically the executive director or a board member. Provide an email address and phone number that will go directly to the contact (if possible), not one for the general organization.

<Select from Organization Contacts>
First & Last Name
Phone Number + Extension
Email Address

2. Additional Contact

<Select from Organization Contacts>
First & Last Name
Phone Number + Extension
Email Address

3. Authorized Official

Provide the name and contact information for the person authorized to sign contracts on behalf of the organization. This is usually the Executive Director or a board member.

<Select from Organization Contacts>
First & Last Name
Phone Number + Extension
Email Address

4. National Endowment for the Arts Descriptors:

4.1 Applicant Status _____

4.2 Institution Type _____

4.3 Applicant Discipline _____

B – Eligibility

1. **All Individuals:** Check all that apply.*
 - I am a Florida resident (proof of residency required).
 - I am at least 18 years of age.
 - I am not enrolled in a degree or certificate program.

2. **All individuals: Are all grant activities accessible to all members of the public regardless of sex, race, color, national origin, religion, disability, age or marital status?***
 - Yes (required for eligibility)
 - No

3. **All Individuals: Project start date: (MM-DD-YYYY) - Project End Date: (MM-DD-YYYY)**

4. **All Individuals: Applicant is Florida-based practicing professional?***
 - Yes (required for eligibility)
 - No

5. **Arts in Education – Teaching Artists or Artist Performances on Tour: Applicant provides an extensive arts education program with activities?***
 - Yes (required for eligibility)
 - No

6. **Arts in Education – Teaching Artists or Artist Performances on Tour: Applicant provides study guides, learning materials, or sample lesson plans?***
 - Yes (required for eligibility)
 - No

7. **Arts in Education – Teaching Artists or Artist Performances on Tour: Do you have a Florida Professional Educator's Certificate?***
 - Yes
 - No

 - What are your certifications? _____

8. **Arts in Education – Teaching Artists or Artist Performances on Tour: Do you have experience working with students of different socioeconomic backgrounds?***

Different cultures?

Special needs?

9. Arts in Education – Teaching Artists: What 21st Century skills do you employ?*
(check all that apply)

- Critical Thinking
- Creativity
- Collaboration
- Communication
- Flexibility
- Information Literacy
- Initiative
- Leadership
- Media Literacy
- Productivity
- Social Skills
- Technology Literacy

10. Arts in Education – Teaching Artists: What arts integration practices have you employed?* **(check all that apply)**

- Drawing on students' prior knowledge
- Providing active hands-on learning with authentic problems for students to solve in different ways
- Arranging opportunities for students to learn from each other to enrich their understandings
- Engaging students in reflection about what they learned, how they learned it, and what it means to them
- Using student assessment of their own and peers' work as part of the learning experience
- Providing opportunities for students to revise and improve their work
- Building a positive classroom environment where students are encouraged and supported to take risks, explore possibilities, and where a social cooperative learning community is created and nurtured

In what content areas and grade levels?

11. Arts in Education – Teaching Artists: Do you have experience teaching alone in a classroom? If yes, briefly describe*

12. Arts in Education – Teaching Artists: Do you have experience co-teaching or collaborating with the classroom teacher? If yes, briefly describe*

13. Arts in Education – Teaching Artists: How do you assess student learning?*

- Built into assignment
- Exam

- Class observation
- Concept mapping
- Concept tests
- Assessment of group work
- Rubrics
- Other (please specify)

14. Arts in Education – Teaching Artists: What are your top priorities/goals/outcomes?*

- to share my art discipline
- to use my art discipline to teach another subject or concept
- for our student to enjoy the learning process
- to expose our students to new thoughts and ideas
- to give our students new tools for self-expression

C – Quality of Offerings

1. Applicant Artist Statement (Individual)*

2. Project (SCP) Description*

Briefly describe the project or program for which you are requesting funding.

2.1 Programming or Project Goals *

Please list at least three goals associated with the project or program you are for which you are requesting funding.

Goals: Broad statements that are usually general, abstract, issue oriented with realistic priorities. Goals are a long-term end to which programs and activities are developed and should reflect the organization’s mission statement. Goals can be listed in priority order and ranked.

Sample goal: To provide residents and visitors with increased opportunities to view local art and meet local artists.

2.2 Programming or Project Objectives *

Please list the three corresponding objectives for the goals listed above.

Objectives: Specific, measurable ends that are achievable within a time frame and mark progress towards achieving goals.

Sample Objective: At least 300 residents and visitors will view local art and be invited to a “meet the artist reception”

2.3 Programming or Project Activities*

Please list the project or program activities.

Activities: These are the specific activities that achieve the objectives.

Sample Activities: Work with local arts and tourism organizations to promote art shows. Communicate with local art teachers to encourage students to attend shows. Schedule artist commentaries and news articles to promote the shows.

2.4 Partnerships & Collaborations*

Describe any partnerships and/or collaborations with organizations directly related to General Programming (GPS) or the Specific Cultural Project (SCP). Discuss the responsibilities and benefits of the relationship and whether any formal agreements are in place.

3. Project/Program Evaluation*

How will you determine if your Goals and Measurable Objectives are achieved? Who will conduct the evaluation, and who will the evaluation target? What methods will be used to collect participant feedback? (Surveys, evaluation forms, interviews, etc.) When will you collect the information, and how will it be used to inform future programming?

Describe the expected outcomes of the project. How will you determine the success of the project?

4. Individual Artist Project*

What makes your project artistically strong? What is your motivation for this project, how will it advance your career and creative practice? What is the artistic context of this project to your creative practice?

D – Impact - Reach

Instructions

Do not count individuals reached through TV, radio, cable broadcast, the Internet, or other media. Include actual audience numbers based on paid/free admissions or seats filled. Avoid inflated numbers, and do not double-count repeat attendees.

1. What is the estimated number of events related to this proposal?*

How many different events will be produced or presented within the grant period as a part of this proposal? Be sure to list different events, not performances. For example: 1) a musical performed 10 times is only one event; 2) a workshop performed one time is one event.

2. What is the estimated number of opportunities for public participation for the events?*

Each event will have one or more opportunities for public participation. For example a musical performed 10 times is one event with 10 opportunities for public participation.

3. How many Adults will participate in the proposed events?*

Enter the number of individuals over 18 who will be directly engaged with the arts, whether through attendance at cultural events or participation in cultural learning or other types of activities in which people will be directly involved with artists or the arts. This figure should reflect a portion of the total individuals benefiting.

4. How many K-12 students will participate in the proposed events through their school?*

Enter the number of individuals under the age of 18 that are expected to be directly engaged with the cultural activities through their school, whether through attendance at cultural events or participation in cultural learning or other types of activities in which people will be directly involved with artists or the arts and cultural events through their school. This figure should reflect a portion of the total individuals benefiting.

5. How many individuals under the age of 18 will participate in the proposed events outside of their school?*

Enter the number of individuals under the age of 18 and over that are expected to be directly engaged with the cultural activities not through their school, whether through attendance at cultural events or participation in cultural learning or other types of activities in which people will be directly involved with artists or the arts not through their school. This figure should reflect a portion of the total individuals benefiting.

6. How many artists will be directly involved?*

Enter the estimated number of professional artists that will be directly involved in providing artistic services specifically identified with the proposal. Include living artists whose work is represented in an exhibition regardless of whether the work was provided by the artist or by an institution. This figure should reflect a portion of the total individuals benefiting. If no artists were directly involved in providing artistic services enter 0.

Number of artists directly involved?

Number of Florida artists directly involved?

7. How many individuals will benefit through media?

Enter the number of individuals who will benefit through TV, radio, cable broadcast, the internet, or other media.

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8. Proposed Beneficiaries of Project – Select all groups of people that your project intends to serve directly. For each group, you can select more than one answer if applicable. If your project/program served the general public without a specific focus on reaching distinct populations, then select the “No Specific Group” options.

8.1 Race Ethnicity: (Choose all that apply)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- White
- Other racial/ethnic group
- No specific racial/ethnic group

8.2 Age Ranges (Choose all that apply)

- Children/Youth (0 – 17 years)
- Young Adults (18 – 24)
- Adults (25 – 64 years)
- Older Adults (65+ years)
- No specific age group

8.3 Underserved/Distinct Groups:

- Individuals with Disabilities

- Individuals in Institutions
- Individuals below the Poverty Line
- Individuals with Limited English Proficiency
- Military Veterans/Active Duty Personnel
- Youth at Risk
- Other underserved/distinct group
- No specific underserved/distinct group

9. Describe the demographics of your service area.

10. **Additional impact/participation numbers information** (optional)

Use this space to provide the panel with additional detail or information about the impact/participation numbers. Describe what makes your organization/programming unique.

11. **In what counties will the project/program actually take place?***

Select the counties in which the project/programming will actually occur. For example, if your organization is located in Alachua county and you are planning programming that will take place in Alachua as well as the surrounding counties of Clay and St. Johns, you will list all three counties. Please do not include counties served unless the project or programming will be physically taking place in that county.

<list of Florida counties>

12. What counties does your project serve?

Select the counties in which your organization provides services. For example, if your organization is located in Alachua County and you provide resources and services in Alachua as well as the surrounding counties of Clay and St. Johns, you will list all three counties. This might include groups that visit your facility from other counties.

[List of Florida counties]

13. Describe your virtual programming.

Briefly describe any virtual programming that you provide to the public. This information should include who is able to access the programming and any payment structure.

14. Proposal Impact*

How is your organization benefitting your community .What is the economic impact of your organization?

Solo or Individual Artists: Include any positive social elements and community engagement anticipated from the project.

15. Marketing and Promotion*

How are you marketing and promoting your organizations offerings?

- Billboards
- Brochures
- Collaborations_____
- Direct Mail
- Email Marketing
- Magazine
- Newsletter
- Newspaper
- Pay Per Click (PPC) Advertising
- Podcast
- Radio
- Organic Social Media
- Paid Social Media
- Television
- Other_____

16. Describe how the facilities and proposal activities are accessible to all audiences and any plans that are in place to improve accessibility.*

In addition to your facility, what step are you taking to make your programming accessible to persons of all abilities and welcoming to all members of your community?

For example, explain use of accessibility symbols in marketing materials, accessibility of facilities and programming and/or target population. You can find resources on accessibility at <http://dos.myflorida.com/cultural/info-and-opportunities/resources-by-topic/accessibility/>. We encourage all applicants to include images in the support materials showing the use of accessibility symbols in marketing materials.

17. Accessibility includes other factors besides physical. What efforts has your organization made to provide programming for all?

18. Describe the Diversity of your staff, volunteers, and board members.

19. Artist Project:

Please identify Division Goals addressed by your project (check all that apply)*

- a. Building the economy and creative industries
- b. Enhancing education through arts and culture
- c. Advancing leadership in arts and culture in the state and nation
- d. Promoting healthy, vibrant, and thriving communities
- e. Advancing a sense of place and identity

Explain:

F – Management and Operating Budget

1. Fiscal Condition and Sustainability*

Artist Projects only

Describe your ability to complete the proposed project. Include examples of successfully completed projects.

G – Management and Proposal Budget

1. Rural Economic Development Initiative (REDI) Waiver*

Applicants located in counties or communities that have been designated as a rural community in accordance with Section 288.0056 and 288.06561, Florida Statutes, may request a waiver of matching requirements. [Am I in a REDI community?](#)

Are you in a REDI community and requesting a waiver?

- Yes
- No

2. Proposal Budget Expenses

Detail estimated proposal expenses in the budget categories listed below. Include only expenses that specifically related to the proposal. You can find a list of non-allowable and match only expenses at <http://dos.myflorida.com/cultural/grants/grant-programs/> Proposal Budget expenses must equal the Proposal Budget income.

The expense section contains three columns:

- a. Grant funds (these are the funds you are requesting from the state)
- b. Cash Match (theses are earned or contributed funds supplied by your organization)
- c. In-kind (the value of donated goods and services)

Do not include any non-allowable expenses in the proposal budget. (see non-allowable expenses).

For General Program Support the Proposal Budget should match the operating budget minus any non-allowable expenses (see non-allowable expenses).

<Insert proposal budget expenses in table provided>

Amount of Grant Funding Requested: _____

Match Amount: _____

3. Proposal Budget Income

Detail the expected source of the cash match (middle column) your organization will be using in order to match the state funds (first column) outlined in the expense section. Use the budget categories listed below. Do not include your grant request (first column) or in-kind (third column). Include only income that specifically relates to the proposal. The Proposal Budget income must equal to the Proposal Budget cash match in the expenses.

<Insert match sources in table provided>

4. Additional Proposal Budget Information (optional)

Use this space to provide the panel with additional detail or information about the proposal budget. For example, if you have more in-kind than you can include in the proposal budget you can list it here.

H – Attachments and Support Materials

Complete the support materials list using the following definitions.

- **Title:** A few brief but descriptive words. Example: "Support Letter from John Doe".
- **Description:** (optional) Additional details about the support materials that may be helpful to staff or panelists. Identify any works or artists featured in the materials. For larger documents, please indicate page number for DCA credit statement and/or logo.
- **File:** The file selected from your computer. For uploaded materials only. The following sizes and formats are allowed.

Content Type	Format/extension	Maximum size
Images	.jpg, .gif, .png, or .tiff	5 MB
documents	.pdf, .txt, .doc, or .docx	10 MB
audio	.mp3	10 MB
video	.mp4, .mov, or .wmv	200 MB

MacOS productivity files such as Pages, Keynote, and Numbers are not acceptable formats. Please save files into .pdf format before submission.

NOTE: Not all of the attachments listed below apply to all applicant types. See Program Guidelines for specific requirements, or talk to your program manager. In the actual application, only attachments applicable to your application type will appear.

1. **Required Attachments List**

Please upload your required attachments in the spaces provided.

Substitute W-9 Form (you can get the form at <https://flvendor.myfloridacfo.com/>)*

Choose file:	Upload file
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Consultant's Resume*

Choose file:	Upload file
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Work Sample*

Choose file:	Upload file
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Resumes of Significant Personnel*

Choose file:	Upload file
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List of Recent Tours*

Include city/county/state, venue, and audience impact numbers.

Choose file:	Upload file
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Educational Materials*

Samples of study guides, materials, hand-outs, lesson plans, and other educational materials used in activities and residencies.

Choose file:	Upload file
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Standard Contract*

Provide a copy of the artist’s standing touring contract with all riders.

Choose file:	Upload file
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Promotional Materials/Press Kit*

Choose file:	Upload file
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Documentation of official Local Arts Agency designation*

All Local Arts Agency applicants must provide documentation (letter, proclamation or official meeting minutes) of official designation by one or more county commissions. This includes county arts councils established in accordance with section 265.32, Florida Statutes.

Choose file:	Upload file
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2. Support Materials (required)

At least one (1) Support Material is required to be submitted with the application. Attachments and support materials will not be accepted by any other method including email and fax. See the guidelines for additional information.

Title

File

To add a support material enter a title and optional description. Then select a file and click the Upload File button.

Choose file:	Upload file
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Description (optional)

Additional details about the support materials that may be helpful to staff or panelists.

I – Notification of International Travel

In accordance with Section 15.182, *Florida Statutes*, the grantee shall notify the Department of State of any international travel at least 30 days before the date the international travel is to commence or, when an intention to travel internationally is not formed at least 30 days in advance of the date the travel is to commence, as soon as feasible after forming such travel intention. Notification shall include date, time, and location of each appearance.

- I hereby certify that I have read and understand the above statement and will comply with Section 15.182, *Florida Statutes*, International travel by state-funded musical, cultural, or artistic organizations; notification to the Department of Economic Opportunity.

J – Florida Single Audit Act

These questions relate to the Florida Single Audit Act. **Important:** if you answer yes, State law requires that you comply with the Florida Single Audit Act, Sections 215.97(2)(a) and 215.97(8)(a) *Florida Statutes*. You will be required to complete a separate certification form in dosgrants.com following the close of each fiscal year this grant is active.

Did you expend \$750,000 or more from all combined state sources during your organization's fiscal year?

- Yes
- No

Did you expend \$750,000 or more from all combined federal sources during your organization's fiscal year?

- Yes
- No

Enter most recently closed fiscal year XX/XX/XXX

K – Review & Submit

1. Guidelines Certification

- I hereby certify that I have read and understand the guidelines and all application requirements for this grant program outlined under section 265.701, *Florida Statutes* and incorporated by reference into Rule 1T-1.039, Florida Administrative Code.

2. Review and Submit

- I hereby certify that I am authorized to submit this application on behalf of [Individual Name], Inc. and that all information indicated is true and accurate. I acknowledge that my electronic signature below shall have the same legal effect as my written signature. I am aware that making a false statement or representation to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S., punishable as provided for by ss. 775.082, 775.083, and 775.084.

Signature (enter first and last name)