

2023 Arts Education Regrant Application Form

* Required

1. Lead Applicant Name *

Individual Artists, Non-Profit Organizations or Government Entities can apply for Arts Education Grants. Ineligible parties can apply through a fiscal sponsor, who should be listed as the lead applicant.

*PDF copies of the 2023 Saratoga Arts Grant applications are provided as a courtesy to applicants to review before applying. Applications that are not submitted through the official application portal will not be honored.

2. Artistic Discipline of Lead Applicant *

Please select the main artistic discipline of the lead applicant from the following options.

Mark only one oval.

- Non-Arts/Non-Humanities
- Crafts
- Dance
- Design Arts
- Folk-Traditional Arts
- Humanities
- Interdisciplinary
- Literature
- Media Arts
- Multi-disciplinary
- Music
- Opera/Music Theatre
- Photography
- Theatre
- Theatre – Storytelling
- Visual Arts

3. What identification best matches the applicant type? *

Mark only one oval.

- Individual Artist *Skip to question 30*
- Non-Profit Organization *Skip to question 4*
- Local Government Entity *Skip to question 4*
- Individual Artist or Organization utilizing a Fiscal Sponsor *Skip to question 42*

Organization Information

4. Organization's EIN number or Tax ID number *

5. Non-Profit Organization Type (Select one of the following) *

Mark only one oval.

- Nonprofit Dept. of Education
- Nonprofit Dept. of State
- Unit of Government/Indigenous Tribe
- Other

6. Organization's Mission Statement *

7. Organization Activities *

Please highlight your organization's main activities, you may include a brief description of each activity.

8. Organization Goals *

What are your organization's goals for the next five years?

9. Organization Composition *

Please select the composition that most accurately describes that of your organization.

Mark only one oval.

- No Single Group
- Native America/Alaska Native
- Asian
- Black/African-American
- Hawaiian/Pacific Islander
- Hispanic/Latino
- White, not Hispanic

10. Organizations Fiscal Year *

Please indicate from when to when your organization's fiscal year runs. (i.e. January 1-December 31 or July 1-June 30, etc.)

11. Date of Incorporation *

Example: January 7, 2019

12. Executive Director *

Or equivalent Organization Executive

13. Executive Director Email *

14. List of Board of Directors *

Include titles, occupation affiliations, addresses and telephone numbers

Files submitted:

15. Organization Financial Statement *

Submit the financial statement form your organizations most recently completed fiscal year. Audited figures preferred. Other acceptable documents include accountant prepared and signed statements or a complete fiscal year report signed by your board treasurer.

Files submitted:

16. Project Manager/Lead Contact *

Can be the same as the Organization Executive Director.

17. Project Manager Email Address *

18. Project Manager Telephone Number *

19. Organization Address *

Location applicant organization operates from, not a P.O. Box

20. Organization Mailing Address

If the same as address above, leave blank

21. Please select the county to which your legal address is registered. All lead applicants must be located in Fulton, Montgomery, or Saratoga Counties. *

Mark only one oval.

- Fulton
- Montgomery
- Saratoga

22. NYS Senate District #, NYS Senator *

Unsure? Visit: <https://www.nysenate.gov/find-my-senator>

23. NYS Assembly District #, NYS Member of Assembly *

Unsure? Visit: <https://assembly.state.ny.us/mem/search/>

24. Website *

25. Did your organization directly apply to NYSCA or REDC for the 2023 Grant Cycle? *

Direct NYSCA applicants are ineligible to apply or act as fiscal sponsors to this grant program.

Mark only one oval.

Yes

No

26. Has your organization applied for Saratoga Arts' Arts Education funding in previous years? *

Mark only one oval.

Yes

No

27. Please list all previous Arts Education (formerly "DEC" or Decentralization) funding. Please write "N/A" if your organization has not received funding in the past. *

Please include only Years and Amounts

28. Proof of applicant's Non-Profit or Government Entity Status (or that of the Fiscal Sponsor if utilizing a Fiscal Sponsor) *

Please select which eligible document you will upload as proof of your organizations non-profit status or status as a government entity.

Mark only one oval.

- Letter of determination from the IRS granting tax-exempt status (NYS "Sales Tax Certificate" is not eligible as proof of non-profit status)
- Documentation of charter by the NYS Board of Regents under section 216 of the New York State Education Law
- Documentation of incorporation under section 402 of the New York State Not-for-Profit Corporation Law
- Current New York State Bureau of Charities filing receipt (from the Office of the Attorney General)
- Local Government Entity: Official authorization as an arm of local government on official letterhead signed by the appropriate county, city, town, or village executive

29. Proof of Non-Profit or Government Entity Status *

Upload a PDF file of the document you selected above.

Files submitted:

Skip to question 67

Individual Artist Information

30. Email Address *

31. Applicant Address *

Location applicant resides, not a P.O. Box

32. Applicant County *

County under which the lead applicant's legal address.

Mark only one oval.

- Fulton
- Montgomery
- Saratoga

33. Applicant Mailing Address

If the same as address above, leave blank

34. Have you applied for Saratoga Arts' Arts Education funding in previous years? *

Mark only one oval.

- Yes
- No

35. Please list all previous Arts Education (formerly "DEC" or Decentralization) funding received. Please write "N/A" if you have not received funding in the past. *

Please include only Years and Amounts

36. Website *

Social media links are acceptable if they are accessible to the public via a web browser and if such a profile is artists main avenue of publicity/community connection.

37. Telephone Number *

38. NYS Senate District #, NYS Senator *

Unsure? Visit: <https://www.nysenate.gov/find-my-senator>

39. NYS Assembly District #, NYS Member of Assembly *

Unsure? Visit: <https://assembly.state.ny.us/mem/search/>

40. Proof of Residency *

Please select which eligible documents you will upload as proof of residency in our service area (Fulton, Montgomery or Saratoga counties). You must upload two (2) of the documents below. All documents must include current address.

Check all that apply.

- Drivers License
- First page of current Federal or NYS tax Return (please block out all financial information)
- Voter Registration Card
- Copy of dated lease or mortgage agreement (please block out all financial information)
- Copy of utility bill (please block out all financial information)

41. Upload Proof of Residency *

Upload a PDF file of the documents you selected above. Can be upload as one document or two.

Files submitted:

Skip to question 67

Fiscal
Sponsorship
Information

If your application utilizes a fiscal sponsor, please complete this section, if not return to the previous section.

42. Fiscal Sponsor Organization Name *

43. Fiscal Sponsor's EIN number or Tax ID number *

44. Fiscal Sponsor Non-Profit Organization Type (Select one of the following) *

Mark only one oval.

- Nonprofit Dept. of Education
- Nonprofit Dept. of State
- Unit of Government/Indigenous Tribe
- Other

45. Fiscal Sponsor Organization's Mission Statement *

46. Fiscal Sponsor Organization Activities *

Please highlight the Fiscal Sponsor organization's main activities, you may include a brief description of each activity.

47. Fiscal Sponsor's Organization Composition *

Please select the composition that most accurately describes that of the Fiscal Sponsor.

Mark only one oval.

- No Single Group
- Native America/Alaska Native
- Asian
- Black/African-American
- Hawaiian/Pacific Islander
- Hispanic/Latino
- White, not Hispanic

48. Fiscal Sponsor's Fiscal Year *

Please indicate from when to when the Fiscal Sponsor's fiscal year runs. (i.e. January 1-December 31 or July 1-June 30, etc.)

49. Fiscal Sponsor's Financial Statement *

Submit the financial statement from the Fiscal Sponsor's most recently completed fiscal year. Audited figures preferred. Other acceptable documents include accountant prepared and signed statements or a complete fiscal year report signed by your board treasurer.

Files submitted:

50. Fiscal Sponsor Date of Incorporation *

Example: January 7, 2019

51. Fiscal Sponsor Executive Director *

Or equivalent Organization Executive

52. Fiscal Sponsor Executive Director Email *

53. Fiscal Sponsor List of Board of Directors *

Include titles, occupation affiliations, addresses and telephone numbers

Files submitted:

54. Proof of Fiscal Sponsor's Non-Profit or Government Entity Status *

Please select which eligible document you will upload as proof of the Fiscal Sponsor's non-profit status or status as a government entity.

Mark only one oval.

- Letter of determination from the IRS granting tax-exempt status (NYS "Sales Tax Certificate" is not eligible as proof of non-profit status)
- Documentation of charter by the NYS Board of Regents under section 216 of the New York State Education Law
- Documentation of incorporation under section 402 of the New York State Not-for-Profit Corporation Law
- Current New York State Bureau of Charities filing receipt (from the Office of the Attorney General)
- Local Government Entity: Official authorization as an arm of local government on official letterhead signed by the appropriate county, city, town, or village executive

55. Fiscal Sponsor Proof of Non-Profit or Government Entity Status *

Upload a PDF file of the document you selected above.

Files submitted:

56. Please select the county to which the Fiscal Sponsor's legal address is registered. All Fiscal Sponsor's must be located in Fulton, Montgomery, or Saratoga Counties. *

Mark only one oval.

Fulton

Montgomery

Saratoga

57. Fiscal Sponsor Address *

Location Fiscal Sponsor organization operates from, not a P.O. Box

58. Fiscal Sponsor's Mailing Address

Leave blank if the same as registered address above.

59. Fiscal Sponsor's NYS Senate District #, NYS Senator *

Unsure? Visit: <https://www.nysenate.gov/find-my-senator>

60. Fiscal Sponsor's NYS Assembly District #, NYS Member of Assembly *

Unsure? Visit: <https://assembly.state.ny.us/mem/search/>

61. Sponsored Organization Name or Sponsored Project Manager/Lead Contact *

62. Project Lead Contact Name *

63. Website *

Social media links are acceptable if they are accessible to the public via a web browser.

64. Project Lead Contact Email Address *

65. Project Lead Contact Telephone Number *

66. Fiscal Sponsorship Memo of Understanding *

Please submit a written memorandum of understanding outlining the services provided by the fiscal sponsor to the sponsored organization as agreed to by both parties.

Files submitted:

Skip to question 67

**Project
Information**

In this section you will outline information related to the Community Arts Project for which you are applying.

67. Project Title *

68. Project Request Amount *

Project requests must range between 500 and 5,000 dollars.

69. Project Overview *

Be sure to outline a minimum of three distinct learning sessions with the same core group of students.

70. Project Timeline *

Please list the proposed dates for project implementation.

71. Project Location Address(es) *

Please indicate your project's location address(es). If your project has any virtual programming, include links to the online locations where that programming would be accessible.

72. Are you applying for more than one project? *

This would include applications as a fiscal sponsor. If "Yes", be sure your project titles are clear and distinguishable from one another.

Mark only one oval.

Yes

No

73. Project Primary Artistic Discipline *

Please select the primary discipline of your project

Mark only one oval.

Crafts

Dance

Design Arts

Folk-Traditional Arts

Humanities

Interdisciplinary

Literature

Media Arts

Multi-disciplinary

Music

Opera/Music Theatre

Photography

Theatre

Theatre – Storytelling

Visual Arts

74. Type of Project *

Select one of the following that best describes the type of event associated with your project.

Mark only one oval.

- Arts instruction
- Audience Services
- Broadcasting
- Concert/performance/reading
- Creation of a work of art
- Demonstration class/ lecture
- Exhibition
- Fair/festival
- Fellowship
- None of the above
- Public Art
- Publication
- Recording/filming/taping
- Repair/restoration/conservation

75. Project Focus *

Does the project specifically focus on incorporating any of the following? (Select any that apply)

Check all that apply.

- Accessibility
- International Access
- Presentation/Touring
- Technology
- Youth at Risk
- Not Applicable

76. Please explain how the requested funds would be used. *

Be sure to reference the Funding Criteria and Priorities outlined in our guidelines (saratoga-arts.org/grants). Be specific as you can about locations and project activities.

77. What teaching role will artist(s) play in the project?

Be sure to list names, titles or roles of these artists, whenever possible.

78. Who is involved in planing and implementing the project and when will they meet? *

79. List the learning goals of this project, give specific examples. *

80. How will you assess the success of your project? *

How will student learning be evaluated? What methods will be used?

81. Describe your publicity plan to promote this project. *

Who is responsible for promoting the project? What tools will they use? How will the targeted learning community become aware of your project?

82. What is the most critical element of your project and what is the estimated cost/dollar value? *

83. How would your project change, maintaining artistic integrity, if you receive less than the amount requested? *

84. Could you change project delivery if necessary, due to venue closure, social distancing or other impact of the ongoing COVID-19 pandemic? Describe. *

85. Student Participation and Audience *

Please upload a spreadsheet outlining how many core students will participate in the project and any audience that will benefit from the project. A template is available at saratoga-arts.org/grants/forms.

Files submitted:

86. How many youth participants do you anticipate? (Please list an approximate number) *

87. How many artists will be participating? (Please list an approximate number) *

88. How many total individuals will benefit from this project? (Please list an approximate number) *

89. Audience Composition *

Select a composition. If no specific composition is anticipated, please select "No Single Group".

Mark only one oval.

- Native America/Alaska Native
- Asian
- Black/African-American
- Hawaiian/Pacific Islander
- Hispanic/Latino
- White, not Hispanic
- No Single Group

90. Project Budget Form *

Please ensure that you are submitting the appropriate form for your project based on whether it is an In-School or Community Based Learning Project. To access our budget template visit saratoga-arts.org/grants/forms

Files submitted:

91. Supplementary budget information

Artistic Information**92. Artistic Support Materials ***

Submit up to five (5) artistic samples that represent your organizations work from the last three years in the medium appropriate to this project. In addition you may upload one (1) pdf document outlining what the samples are. Be descriptive in your file names and supplemental PDF for clarity.

Files submitted:

93. Memo(s) of Understanding with Participating Artists

Upload a single PDF containing all executed memorandums of understanding between your organization and participating artists proposed in the project. Memo can be in the form of an email or formal letter.

Files submitted:

94. List of All Artistic & Administrative Personnel *

Submit a list of names and organizations overseeing the project; provide mailing addresses, email addresses and telephone numbers and specify their role(s) in the project

Files submitted:

95. Artist Resume(s) *

Submit resumes for all artist involved in the project outlining their artistic career and qualifications. Select biographies of two (2) paragraphs are acceptable in place of formal resumes.

Files submitted:

96. Is your project Community Based or In-School? *

In-school projects engage K-12 students during their normal school day.

Mark only one oval.

Community-Based *Skip to question 97*

In-School *Skip to question 98*

Community Project

97. Support Letters from Community Partner(s)

Individual Artists must have the support of a non-profit organization or government entity to be eligible. Please upload a letter of support from a community based partner if this applies to you. If not, proceed to the next section.

Files submitted:

Skip to question 102

In-School Project

98. List all arts and non-arts curricular areas and NYS learning standards you project * focuses on. Provide specific examples.

99. How will you certified teachers be engaged in this project (including non-arts teachers where applicable)?

100. Support Letters from School Administrator and Teacher(s) *
Please upload PDFs of letters of support from school staff and faculty.

Files submitted:

101. Letter of Agreement between applicant and host school *
Letter of agreement should include timeline of activities and be signed by a high level school administrator on school letterhead.

Files submitted:

Skip to question 102

Certification and Release

This section of the form serves as the Certification and Release form. You will have the option to upload a PDF signed form (found at saratoga-arts.org/grants/forms) or digitally accept the terms of certification and release. Please note that digital acceptance may result in additional paperwork later in the process.

102. How will you complete Certification and Release?

Mark only one oval.

- Uploading an executed PDF of the form *Skip to question 103*
- Organization completing an online acceptance of terms which may result in additional paperwork *Skip to question 104*
- Individual Artist completing an online acceptance of terms which may result in additional paperwork *Skip to question 106*

Certification and Release (continued, upload)

103. Certification and Release Upload *

Please upload an executed Certification and Release form (found at saratoga-arts.org/grants/forms) in PDF format.

Files submitted:

Skip to question 108

Organization Certification and Release (continued, digital acceptance)

This Signee certifies that he or she:

1. is a principal officer of the applicant organization with authority to obligate it;
2. has knowledge of the information presented herein;
3. has read the guidelines of the Saratoga Arts Community Arts Regrant Program, incorporated herein by reference, that his/her application complies with and is made subject to said guidelines;
4. is aware of Federal Regulation 504 relating to accessibility of the handicapped to programs and facilities
5. on behalf of the applicant also releases Saratoga Arts, which is the administrative unit of the Community Arts Regrant Program, its employees and agents with respect to damages to property or materials submitted in connection herewith. The applicant further agrees that in the event the applicant commences litigation against Saratoga Arts and or the New York State Council on the Arts, then, in that event, the applicant shall be fully liable for any and all costs, including attorneys' fees incurred by Saratoga Arts and/or the New York State Council on the Arts, their employees and agents in defense of the subject litigation.
6. declares that all statements contains in this application are true and correct; understands that false or incorrect information in the application may lead Saratoga Arts to demand the immediate return of funds awarded through this application and may disqualify the applicant and applying organization from this and future grant opportunities.

104. I agree to the above certification language. *

Signee must be the Executive Director (or equivalent organization executive) or Board President of the applying organization, or the head of the applying municipality or government entity

Mark only one oval.

Yes

No

105. Name of Signee *

Skip to question 108

Individual Certification and Release (continued, digital acceptance)

Certification Language

The undersigned certifies that all information contained in this application is true. The applicant releases Saratoga Arts, which is the administrative unit of the Community Arts Regrant Program, its employees and agents from any liability with respect to damages to property or materials submitted in connection herewith. The applicant further agrees that in the event the applicant commences litigation against Saratoga Arts and or the New York State Council on the Arts, the applicant shall be fully liable for any and all costs, including attorneys' fees incurred by Saratoga Arts and/or the New York State Council on the Arts, their employees and agents in defense of the subject litigation.

106. I agree to the above certification language. *

Signee must be the applicant

Mark only one oval.

Yes

No

107. Name of Signee *

Skip to question 108

**Optional
Survey**

The following survey questions are optional. Completing the survey helps Saratoga Arts improve the services we offer to Fulton, Montgomery, and Saratoga Counties. If you do not wish to complete the survey, please click the submit button after reviewing your application.

108. Where do you go to look for information about community arts resources? (select all that apply)

Check all that apply.

Community Centers

Facebook

Flyers

Google

Instagram

Local Galleries

Mailers

Newspapers

Online Forums

Other: _____

109. How did you hear about Saratoga Arts' Community Regrant Program?

110. Would you be interested in attending artist mixers or professional development meetings aimed at artists and arts organizations?

Mark only one oval.

- Yes
- No
- Possibly

111. Would you be interested in joining a community arts advisory board designed to improve local community arts programming?

Mark only one oval.

- Yes
- No
- Possibly

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