

LAA CULTURAL LEADERSHIP GRANT APPLICATION FORM - FY 2010

Deadline: Monday, April 13, 2009

Submit the Cultural Leadership Grant Application package to: ATT: John Cusano, LAA Program Manager, Connecticut Commission on Culture & Tourism, One Constitution Plaza, 2nd Floor, Hartford, CT 06103

***Note: All LAA Cultural Leadership Grant Application materials must be received (not postmarked) at the Commission's offices by 4:00 PM on Monday, April 13, 2009.**

EVERY BLANK MUST BE FILLED IN (USE N/A WHERE APPLICABLE) IN ORDER FOR THIS FORM TO BE CONSIDERED COMPLETE AND READY FOR REVIEW

APPLICANT INFORMATION

Applicant Name: _____

Private Nonprofit LAA For Private Nonprofits/Federal Employer ID#: _____

Municipal Government LAA

Other/Describe _____

Street Address: _____

Mailing Address (if different): _____

City/State/Zip: _____

Website Address (if available): _____

Telephone: _____ (Ext: _____) Fax: _____

CONTACT INFORMATION

Executive Director/ CEO Name: _____

E-mail: _____

Board President/Chair Name: _____

E-mail: _____

SUMMARY INFORMATION

FY2008 Total Operating Income: _____ FY2008 Total Operating Expenses: _____

Number Full-Time Paid Staff: _____ Number of Part-Time Paid Staff: _____ Number of Volunteer Staff: _____

FOR OFFICE USE: App # _____

APPLICATION NARRATIVE

Format: Create your own narrative attachment not to exceed six (6) pages. Follow the format as described in the LAA Cultural Leadership Application Instructions (see Page 4).

Time Reference for Narrative: Answer all narrative questions as follows

Recent past and/or current time period: July 1, 2008 through Sept 30, 2009

Use the current FY09 LAA grant cycle through the next cycle's start date when referencing the recent past and/or the current time period

Future time period: Oct 1, 2009 through Sept 30, 2011

Use the forthcoming two-year LAA grant cycle when referencing the future

SECTION I

CULTURAL LEADERSHIP (40%)

1. Provide a simple table to graphically display your organization's primary constituent services (not other programming, see Question 3, below). Show services offered currently and in the recent past. Summarize each core service by providing the Program Name/Title; Description; Constituents Served; Successes / Challenges; Funding Source(s).
2. Explain the ways in which your local arts agency has worked to develop your town or region economically, culturally, and socially. Reference the recent past to current time period. Correlate your answer with the future time period referenced in Question 2, Section II, Responsiveness to the Community, below.
3. Describe the role and function of non-service programs (events, arts presentations, festivals, etc.) within the annual activities organized by your local arts agency.
4. Describe your organization's current and planned relationship(s) with other Connecticut LAAs and the way(s) in which your organization interfaces with the state's LAA Network.
5. Describe your organization's cooperative relationship with CCT in the recent past as well as plans for the future.

SECTION II

RESPONSIVENESS TO THE COMMUNITY (30%)

1. Explain how your organization stays in touch with constituent needs. What formal and/or informal procedures does your organization employ to identify new or confirm known community / constituent needs?
2. What key community needs or challenges is your organization planning to address over the next two years?
3. Describe specific strategies and/or current outreach efforts intended to build diversity within your organization's leadership, constituent base, programming and general relationships.
4. Describe efforts to market your organization and its services and programs.

SECTION III

MANAGEMENT & ORGANIZATIONAL HEALTH (30%)

1. Reflect on the goals your organization set for the prior year. To what extent have these goals been achieved? What revisions have been considered or implemented to manage changes?
2. Describe your organization's planning and evaluation processes.
3. Briefly explain your organization's top three management challenges and any plans to address these challenges over the next two years.
4. Describe means or approaches by which your organization addresses the challenges of organizational capacity.
5. Describe any past or planned efforts to obtain new and/or to diversify sources of funding.

ATTACHMENTS

Create and complete all required attachments as explained in the LAA Cultural Leadership Application Instructions.

APPLICATION CHECKLIST & ASSEMBLY

This checklist includes all items required for an application to be considered complete. Check each box to confirm that items are enclosed with your application. See Application Instructions for additional information.

- Do not submit any materials other than those required
- All grant materials must be three-hole punched or printed on three hole paper
- Use a binder clip or elastic to secure each grant package

A complete grant package must include:

- **ONE Grant Package marked “Original”** (*with original signatures*)
- **FOUR Grant Package Copies**
- **Additional Documents**
- **Support Materials**

THE GRANT PACKAGE. Submit **FIVE** complete sets – **ONE Original & FOUR Copies**. Place a note marked “Original” on the “signature” set and place at the top of the 5 sets. Each set must include:

- | | |
|---|---|
| <input type="checkbox"/> Application Form | 1 page / CCT |
| <input type="checkbox"/> Application Narrative | <u>your attachment</u> , no more than 6 pages |
| <input type="checkbox"/> Accessibility Checklist | 1 page / CCT |
| <input type="checkbox"/> Current Strategic Plan or Plan Summary | <u>your attachment</u> , no more than 5 pages |
| <input type="checkbox"/> Governing Body Information | <u>your attachment</u> , no more than 2 pages |
| <input type="checkbox"/> Diversity Statistics | 1 page / CCT |
| <input type="checkbox"/> Biographical Summaries of Key Staff / Volunteers | <u>your attachment</u> , no more than 2 pages |
| <input type="checkbox"/> Operating Income & Expenses Budgets | <u>your attachment</u> |
| <input type="checkbox"/> Financial Statement / Audited Statement | <u>your attachment</u> |
| <input type="checkbox"/> <u>OPTIONAL</u> - Marketing Plan or Plan Summary | <u>your attachment</u> , no more than 5 pages |

ADDITIONAL DOCUMENTS. In addition to the grant package, submit **ONE** complete set of:

- | | |
|--|------------------------|
| <input type="checkbox"/> National Standard Data Collection Form | 3 pages / CCT |
| <input type="checkbox"/> IRS Determination Letter / Municipality Ordinance | <u>your attachment</u> |
| <input type="checkbox"/> Certificate of Nonprofit Incorporation in CT * | <u>your attachment</u> |

* *Submission required only for private non profit LAA applicants*

SUPPORT MATERIALS. In a separate envelope or folder, submit **TWO** sets of your choice of **supplementary materials** (see Application Instructions, Page 11 & 12 for selection instructions):

- Audio / Visual Support Materials:
 - Video / DVD - submit one
 - Photographs or Image CD - up to 10 photos / images

Printed Support Materials - up to 5 items (List below)

OPTIONAL - Self-addressed, postage paid mailer / box for return of support materials

SIGNATURE

Under penalties of perjury, I declare that I have examined information contained in the application for this grant and accompanying documents and, to the best of my knowledge and belief, they are true, correct and complete, and I am in fact eligible for funding under this grant program. I am aware that the submission of any false information or omission of any pertinent information resulting in the false representation of a material fact may subject me to civil and/or criminal penalties for filing of false public record and/or forfeiture of any funding awarded under this program. I further declare that I have reviewed the Commission on Culture & Tourism’s Grant Overview Guidelines and acknowledge that it is my responsibility as a grant applicant to become familiar with these guidelines and that failure to comply could result in ineligibility for the grant program. I understand that should I have any questions regarding these guidelines, I may contact CCT. I further understand that all documents submitted become the property of CCT.

Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____