

**Quick Arts Grants for Individuals/Organization**

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| **DATE SUBMITTED** | **GRANT NAME** |
|  |  |
| **SUBMITTED TO** | **ADDRESS OF RECEIVING PARTY** |
|  |  |
| **SUBMITTED BY** | **ADDRESS OF SUBMITTING PARTY** |
|  |  |
| **AMOUNT REQUESTED FROM BAC** | **$** |
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1. **PROJECT DESCRIPTION**

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| --- | --- |
| 1. STATEMENT OF PROBLEM TO BE ADDRESSED |  |
| 1. GOALS & OBJECTIVES |  |
| 1. TARGET POPULATION |  |
| 1. PROJECT ACTIVITIES |  |
| 1. KEY PERSON |  |

1. **SUCCESS CRITERIA & MEASURABLE OUTCOMES**

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1. **ORGANIZATION BACKGROUND**

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1. **CURRENT PROGRAMS, ACTIVITIES, & ACCOMPLISHMENTS**

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1. **AFFILIATIONS WITH SIMILAR ORGANIZATIONS**

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1. **GOALS & OBJECTIVES**

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2

1. **TIMELINE**

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| --- | --- |
| ACTIVITY | PROJECTED DATE |
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1. **BUDGET**

**BUDGET OVERVIEW**

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| **GENERAL OPERATING SUPPORT** | **BUDGET PURPOSE** |
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| **PROJECT SUPPORT** | **BUDGET PERIOD START & END DATES** |
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| --- | --- | --- | --- |
| INCOME | | EXPENSE | |
| SOURCES | AMOUNT |  | AMOUNT |
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|  |  |  |  |
| **TOTAL** |  | **TOTAL** |  |
| **NET INCOME** | | |  |

3

**LONG-TERM SOURCES / STRATEGIES FOR FUNDING (IF ANY)**

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1. **EVALUATION**

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1. **SUPPORT MATERIALS**

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| --- | --- | --- |
| FILE NAME | DESCRIPTION | LOCATION attachment / link |
|  |  |  |
|  |  |  |
|  |  |  |

**Xl. APPLICANT SIGNATURE**

I understand that everything I have provided herein is accurate to the best of my knowledge and that I am authorized to sign this application. I also understand that support is given by BAC based upon criteria and availability of monies. Application period is quarterly.  Applications received between July 1-September 30 will be decided in October.  Applications received between October 1 – December 31 will be decided in January.  Applications received between January 1 – March 30 will be decided in April and applications received between April 1- June 15 will be decided on before the end of June 30.

Signature of Applicant/Organizational Representative Date

Printed Name of Applicant

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