

**GRANT APPLICATION**  
Abilene Cultural Affairs Council

**SECTION A - ORGANIZATION INFORMATION**

This application is for the following program: ACAC Grants Assistance Program _____ Hearts for the Arts Program _____	
Official Name of Organization:	Date Organization Founded:
Mailing Address:	
Chief Administrative Officer: Address:	Business Phone:  Home Phone:
Financial Officer: Address:	Business Phone:  Home Phone:
Project Director: Address:	Business Phone:  Home Phone:

**SECTION B - PROJECT INFORMATION**

Project Title:	Amount Requested:
Number of persons served by project:	Project Dates:
Facility Name:	
List ALL communities directly served by this project:	
In the space below, provide a clear description of the project. Explain how this project will impact your organization as well as the community. Additional pages for the project description will not be accepted.	

**SECTION C - FINANCIAL INFORMATION**

Fiscal Year:	FY:	FY:	FY:	FY:
Total Revenue:				
Total Expenses:				
Total Prior Support from ACAC:				

**SECTION D - PROJECT BUDGET**

On a separate page, attach budget details for project expenditures noted in items (a) through (j). See sample provided with guidelines.

<b>Expenditures</b> For this project only	<b>To be paid from</b> <b>grant funds</b>	<b>Organization's</b> <b>cash</b>	<b>In-kind</b>	<b>Total:</b>
a. Organization's Staff Salary				
b. Professional Services (Fees for artists, consultant)				
c. Facilities				
d. Travel and Transportation				
e. Lodging				
f. Rentals (except facilities)				
g. Supplies and Materials				
h. Promotion and Printing				
j. Other (list):				
Other (list):				
<b>TOTAL EXPENDITURES:</b>				
<b>Revenues</b> For this project only				
<b>TOTAL GRANT REQUEST:</b>				
Earned Income and Cash Contributions				
a. Admissions (tickets, concessions, etc.)				
b. Individual Donations				
c. Organizational Funds Budgeted (general fund)				
d. Business and Industry Contributions				
e. Foundations				
f. Government Support (NEA, NEH, etc.)				
h. Other (list):				
Other (list):				
<b>TOTAL INCOME AND CONTRIBUTIONS:</b>				
			<b>TOTAL IN-KIND:</b>	
			<b>TOTAL REVENUES:</b>	

**SECTION E - ASSURANCES**

If a grant is awarded, the applicant hereby gives assurance to the ACAC that:

1. The activities and services for which financial assistance is sought will be administered by the applying organization.
2. Any funds received, as a result of this application will be used solely for the project described.
3. The applicant has read, understands and will conform to the Grant Guidelines.

We hereby certify that all figures, facts and representation made in this application, including any attachments are true and correct.

Chief Administrative Officer: \_\_\_\_\_  
Signature: \_\_\_\_\_

Person preparing Grant: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Phone: \_\_\_\_\_