



# LCC GRANT APPLICATION

APPLICATION MUST BE TYPED.

- Please type into the form, print, sign and mail it to the appropriate Local Cultural Council. E-mailed applications will not be accepted.
- Before completing this form be sure to check the guidelines of the LCC to which you are applying at [www.mass-culture.org/lcc\\_public.asp](http://www.mass-culture.org/lcc_public.asp).

This application is being submitted to the \_\_\_\_\_ LCC.

## APPLICANT INFORMATION

Applicant's Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

Contact Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Contact City/State/Zip \_\_\_\_\_

Applicant Phone/TTY \_\_\_\_\_

Contact Phone Day/Evening \_\_\_\_\_

Applicant E-mail Address \_\_\_\_\_

Contact E-mail Address \_\_\_\_\_

Applicant Web Site \_\_\_\_\_

## PROJECT INFORMATION

Project Title \_\_\_\_\_ Amount Requested from this LCC \$ \_\_\_\_\_

Project Start/End Dates \_\_\_\_\_ Approximate Number of People Served \_\_\_\_\_

1. Project Description: Summarize the proposed project in the space provided. Describe who is the target audience; what will happen; when and where it will occur; and how the project will be executed. NOTE: You may provide additional narrative on a separate sheet of paper, but you *must* summarize the project here. Your answer in the space below may not exceed 750 characters.

2. Describe the planning process for this project. What individuals and organizations have been involved as partners and/or advisors? How would partial funding impact this project? Your answer in the space below may not exceed 500 characters.

3. Explain how this project will reach and benefit the citizens of *this* community. How will you know the project is successful? Include promotion, expected results and plans for evaluation. Your answer in the space below may not exceed 500 characters.

4. Describe your plans for promoting this project to your target audience and your community. Include information on planned outreach and publicity activities. Your answer in the space below may not exceed 500 characters.

5. Please detail the qualifications of key artists, humanists, interpretive scientists or organizations involved with leading the cultural component of this project. **Application will be considered incomplete without this information.** Please attach resumes. Your answer may not exceed 500 characters.

## BUDGET INFORMATION

Total Project Cost \$ \_\_\_\_\_

Matching Funds\* \$ \_\_\_\_\_ Source of Matching Funds \_\_\_\_\_

\* Capital expenditures must have a 2:1 match. Check with the local cultural council to see if there are any additional match requirements.

### PROJECT EXPENSES

#### A. Salaries/Fees

- 1. Artist/Humanist/ Interpretive Scientist \$ \_\_\_\_\_
- 2. Administrative \$ \_\_\_\_\_
- 3. Other \_\_\_\_\_ \$ \_\_\_\_\_
- TOTAL Section A \$ \_\_\_\_\_

B. Space Rental \$ \_\_\_\_\_

C. Travel \$ \_\_\_\_\_

D. Marketing \$ \_\_\_\_\_

#### E. Remaining Project Expenses

- 1. Equipment Rental \$ \_\_\_\_\_
- 2. Project supplies or consumables \$ \_\_\_\_\_
- 3. Printing \$ \_\_\_\_\_
- 4. Shipping/Postage \$ \_\_\_\_\_
- 5. Utilities/Telephone \$ \_\_\_\_\_
- 6. Insurance \$ \_\_\_\_\_
- 7. Other \_\_\_\_\_ \$ \_\_\_\_\_
- 8. Ensuring Access \$ \_\_\_\_\_
- TOTAL Section E \$ \_\_\_\_\_

F. Capital Expenditures \$ \_\_\_\_\_

#### G. TOTAL PROJECT EXPENSES\*

(Sum of Totals in Sections A - F) \$ \_\_\_\_\_

\*NOTE: Total Project Expenses and Total Project Revenue must be equal.

### PROJECT INCOME

A. Earned Income \$ \_\_\_\_\_

B. Non-Government

- 1. Corporate/Business \$ \_\_\_\_\_
- 2. Clubs and Organizations \$ \_\_\_\_\_
- 3. Other \_\_\_\_\_ \$ \_\_\_\_\_
- TOTAL Section B \$ \_\_\_\_\_

#### C. Government

- 1. Other Local Cultural Councils \$ \_\_\_\_\_  
(Attach list specifying LCC names and \$)
- 2. Other MCC Programs \$ \_\_\_\_\_  
\_\_\_\_\_
- 3. Other (Municipal, School, etc.) \$ \_\_\_\_\_  
\_\_\_\_\_

TOTAL Section C \$ \_\_\_\_\_

D. Applicant Cash \$ \_\_\_\_\_

E. Amount Requested from this LCC \$ \_\_\_\_\_

F. In-Kind Contributions \$ \_\_\_\_\_

(donated space, materials and/or services)

#### G. TOTAL PROJECT REVENUE\*

(Sum of Totals in Sections A - F) \$ \_\_\_\_\_

**Authorized Signature:** The signature below is that of the person authorized to testify as to the accuracy of this application and the person who agrees that the required acknowledgment will be given to the Massachusetts Cultural Council and the granting local cultural council, if this application is approved. This person also agrees that reasonable accommodations will be made to insure that people with disabilities have equal physical and communications access, as defined by federal law and as outlined in the MCC's LCC Program Regulations and Guidelines.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

FOR CULTURAL COUNCIL USE ONLY

SUBMITTED BY DEADLINE?  Yes  No

\$ \_\_\_\_\_  
Amount Approved Signature of LCC Chair or Authorized LCC Member Title Date