ACHF Organization Grant

East Central Regional Arts Council

Grant Number*
Character Limit: 15

Organization Information

Project Director:*  
Character Limit: 250

Project Director Title*  
Character Limit: 250

Project Director Email Address*  
Character Limit: 250

Project Director Phone Number (day):*  
Character Limit: 250

Grant Writer:*  
Character Limit: 250

Grant Writer Title*  
Character Limit: 250

Organization's Authorized Signer*  
This person cannot be the same as the Project Director.  
Character Limit: 30

Organization's Authorized Signer email address*  
This email address will be used if the application is approved. The grant contract will be emailed for signature from the organization's authorized signer.  
Character Limit: 100

Our group/organization:

Yes = Correct  
No = Incorrect

Has no Misuse of Funds determination with:*  
- the MN State Arts Board or
• any designated MN Regional Arts Council.

**Choices**
Yes
No

**Has no outstanding or unacceptable final reports with the East Central Regional Arts Council.**

**Choices**
Yes
No

**Is incorporated as a nonprofit or is a unit of government or ISD**

or has an official fiscal agent agreement with a nonprofit, unit of government, or independent school district (ISD).

**Choices**
Yes
No

**Is located in and serves the counties of:**
Chisago, Kanabec, Isanti, Mille Lacs or Pine.

**Choices**
Yes
No

**Has three or more members.**

**Choices**
Yes
No

**The project will not include any of the activities not funded by ECRAC.**

Activities not funded by ECRAC may be referenced in the grant guidelines on pages 17-18. An example of an activity not funded by ECRAC includes: any travel costs outside of Minnesota. You may engage an out-of-state artist within your project, but their travel expense to get to or from Minnesota cannot be included in the request.

**Choices**
Yes
No

**In promotion of the project I will use the ECRAC funding credit line, ECRAC logo, and the ACHF logo.**

**Choices**
Yes
No
This application only accepts the following file type(s) for upload:*  
- PDF  
- Word  
- Excel  
- MP3  

Choices  
I understand

ECRAC no longer requires organization applicants to submit the following:*  
- IRS letter documenting 501c3 tax exempt status  
- yearly 990 or 1023  
- or audit report  

Choices  
I understand

**Fiscal Sponsor Information, If Applicable**  
*If your group is not using a fiscal sponsor, the following section will be blank.*

**Fiscal Sponsor Agreement**  
A sample Fiscal Sponsor Agreement, if needed, can be found on page 27 of the Grant Guidelines. For additional information on fiscal sponsorship click here.  
*File Size Limit: 2 MB*

**Fiscal Sponsor Organization Name:**  
*Character Limit: 250*

**Fiscal Sponsor Mailing Address:**  
*Character Limit: 250*

**Fiscal Sponsor City:**  
*Character Limit: 250*

**Fiscal Sponsor State:**  
*Character Limit: 50*

**Fiscal Sponsor Zip Code:**  
*Character Limit: 250*
Fiscal Sponsor Contact Person:
Must be an authorizing official of the sponsor organization.
Character Limit: 250

Fiscal Sponsor Contact Person Title:
Character Limit: 250

Fiscal Sponsor Contact Person Phone Number (day):
Character Limit: 250

Fiscal Sponsor Contact Person Email Address:
Character Limit: 250

Fiscal Sponsor Tax Exempt Number (EIN):
Character Limit: 250

Project Summary Information

Grant Project Title*
Character Limit: 30

Brief Project Description:*  
Character Limit: 750

Project Start Date:*  
See Grant Guidelines, page 12, for start and end date requirements.  
Character Limit: 10

Project End Date:*  
Character Limit: 10

Grant Amount Requested - $5,000 to $15,000*
From your completed Project Expense Template.  
Character Limit: 20

Total Project Cost*
From your completed Project Expense Template.  
Character Limit: 20

Date of grant writer and project director attendance at ECRAC grant information session.  
This is optional but highly recommended.  
Character Limit: 250
Is your project’s venue publicly accessible and ADA compliant?*
Choices
Yes
No

In the proposed project,*
your organization will not include travel expenses or activities that do not take place in MN.
Choices
Yes
No

In the proposed project,*
your organization will not include expenses to purchase alcoholic beverages or to pay associated costs (servers, insurance, liquor licenses, etc.).
Choices
Yes
No

Request Narrative and Summary of Proposal

Detailed Project Summary*
Include descriptions of all activities involved in completing the proposed project:

• date(s),
• location(s),
• workshops or other training,
• number of performances,
• names of staff, artists or companies,
• your required open to the public event,
• define your community served,
• how you will demonstrate equity and inclusion for the grant project in the community served,
• and any other information that will help the Arts Council understand your project.

Keep in mind that the Arts and Cultural Heritage Funds can only support activities that address the three key areas of: Arts and Arts Access, Arts Education, and Arts and Cultural Heritage. Refer to the definitions in the ACHF Grant Guidelines for further detail.

* Character Limit: 5000
Project Schedule
If you have a project schedule upload it here. For example, if your project includes multiple classes/events, a schedule with dates, times and locations is appropriate to include with your application.

*File Size Limit: 2 MB*

Project Impact Evaluation*
How does this project:

- instill the arts into your community and public life?
- provide a high quality arts experience?
- give access in Region 7E to a quality arts experience?
- help to develop knowledge, skills and understanding of the arts?
- help to represent diverse, ethnic and cultural arts traditions, if applicable?

*Character Limit: 1200*

Promotion and Publicity Plan*
Detail here how your organization will provide promotion and publicity for the project. Include specific media and costs.

*Character Limit: 1000*

Artistic Merit*
All ACHF grants must have a heightened sense of artistic merit. Explain how your project will expand both your organization’s artistic capabilities and the artistic experiences of your audience.

*Character Limit: 1200*

Why did you select the artist(s) or artist companies participating in this project?*

*Character Limit: 3000*

All artists mentioned must have an artistic résumé. Upload all artistic résumés here.*

*File Size Limit: 4 MB*

Artistic Work Samples - ECRAC allows organization applicants to upload artistic work samples. As you select a work sample(s) for submission, remember that artistic excellence is the primary criteria. It is important that the samples you submit represent your artists work to its best advantage. In general, the grant reviewers are not looking for a range in abilities. Rather, they look for a cohesive vision for grant recipients. In addition, the ECRAC board requests that your uploaded work samples are 4 years old, or less. If they are not, include an explanation of why in the application. The grant guidelines has a detailed list of acceptable work samples.
Combine samples as needed into documents/files in order to upload. You may also link to a YouTube video in the space provided.

**Work Sample upload**
Use this upload if you have visual or written work samples.

*File Size Limit: 22 MB*

**Work Sample Description**
*Character Limit: 1000*

**YouTube or other website address for audio/video**
*Character Limit: 2000*

**Work Sample Description**
*Character Limit: 1000*

**YouTube or other website address for audio/video**
*Character Limit: 2000*

**Work Sample Description**
*Character Limit: 1000*

**Organizational Ability**
What year was your organization started?
*Character Limit: 10*

**Artistic Mission**
Briefly describe the artistic mission of your organization. How will the proposed project help your organization fulfill that mission? If yours is not an art organization, please explain your artistic mission for this project. How will this project advance your organization's mission?
*Character Limit: 1000*

**Describe the governing body of your organization.**
*Character Limit: 500*
**Attach a list of your board members.***
Include their address, profession, organizational affiliation and/or area of expertise.

*New!* ECRAC strongly recommends you add an advisory committee member list to the Board Member list if there is one and/or if none of the Board Members are Region 7E residents.

*File Size Limit: 2 MB*

**Explain how your organization is staffed.***

*Character Limit: 450*

**Summarize the qualifications of the Project Director.***

*Character Limit: 500*

**Attach Project Director work résumé.***

*File Size Limit: 2 MB*

**Describe the project planning process and who was involved.***

*Character Limit: 1500*

**Additional work resumes**
Any staff person mentioned for the project must have a work résumé included with the proposal. Combine all documents into one file and upload below.

**List any projects your organization has completed in the past three years.***

*Character Limit: 400*

**List all ECRAC funded projects your organization has had in the past three years.***
Include the year and the amount funded.

*Character Limit: 2000*

**Repeat Grant Project Information**
If your organization received grant support from the East Central Regional Arts Council in one or more of the past three fiscal years, please answer the following:

- How does this project differ from the past funded projects?
- Is it more challenging, original, or a change in direction from past projects?
- Explain how your project will expand your organization’s artistic capabilities and the artistic experiences of your audience.

Repeat grant projects must have a heightened sense of artistic merit. If you are not a repeat grantee reply here with not applicable.

*Character Limit: 1000*
**Outcome Evaluation**

**Outcome Evaluation Plan**

Funding for this program comes from the Arts and Cultural Heritage Fund, a fund created by the people of Minnesota to support the arts. Outcome evaluation is a legislatively required part of all ACHF grant funding proposals.

**You must include outcome evaluation costs in your budget expenses.**

Refer to the Grant Guidelines pages 7-9.

Which of the following best describe the majority of the people you plan to serve with this project:*

**Choices**
- Young children
- School age children
- Teens or youth
- Adults – general public
- Adults – professionals or peers
- Adults – artists
- Adults – learners
- Adults – seniors or elders
- Inter-generational groups (e.g., families)
- Communities (e.g., neighborhoods or cities)
- Organizations
- People in institutional settings
- People who might have difficulty communicating (e.g., reading, writing, or speaking)
- People who may have sensory difficulties (e.g., vision or hearing)
- People who may have mobility difficulties
- People who may have cognitive difficulties

Which of these broad areas best describes the kind of change you expect from your project?*

Sometimes thinking about different kinds of possible changes or effects can help us connect a grant maker’s very broad program outcomes to your own, specific outcomes for your project.

**Choices**
- Artists and the arts are visible in communities
- Artists develop their practice
- Organizations develop capacities that advance the arts
- People access arts experiences
- People develop arts skills or knowledge
- People have meaningful arts experiences
- People make connections to ideas, organizations, or one another
What kinds of specific changes do you expect to see in the people to be served by this project?*

Having a specific outcome in mind means that the people you serve are supposed to be different in some way as a result of this project.

**Choices**
An emotional response or reaction
A changed attitude about something or someone
A new awareness about something or someone
A new intention or motivation to take some course of action
A changed perception of themselves or others
A new or expanded understanding or knowledge about some topic
A new or expanded skill in some area
A change to their behavior after this experience
Changes to their relationships with someone else: new, strengthened, or enriched
Your organization will have a new or improved ability or capacity to do something
A change to some other condition eg, individual well-being, community strength, etc

**Outcome Measurement**

There are many ways to measure the results of projects; for example, collecting verbal or written stories and comments, surveys, focus groups, and interviews. For the visual arts, exhibit guest books are often used to capture comments. For the performing arts, attendance numbers or audience surveys may be useful. Comments/Critiques by peers can also be a way to assess the impact of your work. Schedule an appointment with staff if this will assist you in your proposal.

**Outcome Measurement***

What kinds of data or information will you gather?

- Quantitative: numbers or categories of things used to look for outcomes by rating, totaling, or comparing.
- Qualitative: observations or narratives used without any pre-determined categories of information to look for outcomes as they emerged from an experience or discussion.
- Both: a combination of both quantitative and qualitative information.

**Choices**
Quantitative
Qualitative
Both Quantitative and Qualitative

**Outcome Evaluation Method Types***

What kinds of methods do you anticipate using to document progress toward your project outcomes? Please note that the term stakeholder suggests the people data is gathered from and could be participant, audiences, community members, artists, project partners or organization staff. It depends on the project being proposed.
Choices
Reviewing program statistics or other documents related to the project
Reviewing or critiquing a portfolio, experience, or other artifacts of the project
Conducting interviews with stakeholders
Conducting focus groups with stakeholders
Creating one or more case studies about the project
Making structured observations of stakeholders during project activities
Surveying stakeholders about their knowledge skills, attitudes, behaviors, or motivations
Gauging stakeholder priorities using interactive methods such as sorting cards or voting
Having stakeholders describe or capture their own impressions

Project Budget
Submit your organization’s current year annual budget as a supplement to this project’s budget.*

File Size Limit: 2 MB

Project Budget Details*
Please download, complete and upload the Project Budget Template here. For details see pages 22-24 in the guidelines.

File Size Limit: 2 MB

Project Expense Details and Explanations*
Describe your project expense details and explanations for each of your budget line items here. For example, if your total amount of artists fees is $3,000, your explanation would look like:

- artists fees: ABC Band $1,500, XYZ Band $1,500 = $3,000.

Do this for each line item. Note: these are not for profit grant projects. If the budget shows a profit, or appears to be a fundraiser, the application is ineligible.

Round all amounts to the nearest dollar.

Character Limit: 5000

Project Income Details and Explanations*
Describe your project income details and explanations for each of your budget line items here. For example, if your total amount of earned income is $1,000, your explanation could look like:

- earned income: sale of 100 tickets at $10 each = $1,000

Do this for each line item. Note: these are not for profit grant projects. If the budget shows a profit, or appears to be a fundraiser, the application is ineligible.

Round all amounts to the nearest dollar.

Character Limit: 1500
Equipment Purchase
If your project includes the purchase of a piece of equipment totaling more than $500 you are required to include three separate price quotes. One of these quotes needs to be from a Minnesota based vendor. Include each quote in the upload links provided below. The lowest amount need not be selected.

Describe here which quote you have chosen, and why.

Character Limit: 1000

Price Quote 1
File Size Limit: 2 MB

Price Quote 2
File Size Limit: 2 MB

Price Quote 3
File Size Limit: 2 MB

Equipment Use Plan
Grant requests from organizations for project equipment purchases of $500 or more must also include: a detailed plan for the use of the equipment; and a statement certifying they will not sell the equipment without prior ECRAC approval and that you understand ECRAC may use a UCC filing. Additional information can be found in the ACHF Grant Guidelines.

File Size Limit: 2 MB

Amount of ECRAC/ACHF Grant Request:* This should be the same amount as requested in the project summary information.

Character Limit: 20

ECRAC/ACHF Certification

Certification*
Download, read, and complete the ECRAC/ACHF Certification. Upload the signed document here.

FYI - Two separate signers are required. One signer must be an authorizing officer of the board or the fiscal sponsor organization. The other signer must be the project director. Please note: electronic signatures are accepted.

File Size Limit: 2 MB
FYI - To ensure all application files have uploaded and will open properly for reviewers, applicants should use the "Application Packet" button located at the top of the application. Any file upload error messages will appear on the "File Attachment Summary" page in the Application Packet.

Contact staff via email at grantinfo@ecrac.org or by telephone at 320-591-7034 if you have any questions or concerns regarding your application. If requested early enough in advance of the grant deadline ECRAC staff can review your draft application.

Regional Arts Council Data Collection

Regional Arts Council Grant Data Collection*
These reporting fields are not used in the evaluation of your grant request and are simply used for data collection purposes.

Choices
I understand

Are you a new applicant?*

Choices
Yes
No

County*
Choose the county below in which your organization is located.

Choices
Chisago
Isanti
Kanabec
Mille Lacs
Pine

MN House District*
MN legislative house district where the applicant is located (Click Here to use the district poll finder).

Due to redistricting be sure to check Poll Finder for the correct House District

Choices
11B
15A
31A
32A
32B
39A
**Congressional District**
U.S. congressional district where the applicant is located. To be eligible to apply you must live within the five county East Central Minnesota Region which is congressional district 8.

**Choices**
8

**Special Characteristics (optional)**
**For Organizations:** select the one code that best represents 50% or more of your staff, board, or membership.

**Choices**
D Individuals with Disabilities
I Individuals in Institutions
P Individuals below the Poverty Line
E Individuals with limited English Proficiency
M Military Veterans/Active Duty Personnel
Y Youth at Risk
G No single distinct group makes up more than 25% of the population served
5 Pre-K, children 5 and under
99 None of the Above

**Race/Ethnicity (optional)**
**For Organizations:** Please select the option that best represents 50% or more of your staff or board or membership.

**Choices**
N American Indian/Alaskan Native
A Asian
P Native Hawaiian/Pacific Islander
B Black/African American
H Hispanic/Latino
M Middle Eastern/North African
W White
99 when no single group applies
O Other

**Age Group**
Select the categories that best represent the age of those benefiting from your project.

**Choices**
1 Children/Youth (0 - 18 years)
2 Young Adults (19 - 24 years)
3 Adults (25 - 64 years)
4 Older Adults (65 + years)
9 No single age group
**Status**
Select the one code that best describes the applicant. Click Here for a list of current Status codes. Example, enter "08" for Museum - Art.

**Choices**
01
02
03
04
05
06
07
08
09
99

**Institution**
Select the one code that best describes the applicant. Click Here for a list of current Institution codes. Example, enter "08" for Museum - Art.

**Choices**
01
02
03
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26
27
28
Discipline*
Select one code that best describes the applicant's primary area of interest in the arts. Click Here for a list of current Discipline codes. Example, enter "01A" for Dance, ballet.

Choices
01
01A
01B
01C
02
02A
02B
02C
02D
02E
02F
02G
02H
02I
03
03A
03B
04
04A
Project Discipline*
Select one category that best describes the proposed project activity. Click Here for a list of current Discipline codes.

Choices
01
01A
01B
01C
02
02A
02B
02C
02D
02E
02F
02G
02H
02I
03
03A
03B
04
04A
04B
04C
04D
04E
05
05A
05B
05D
05F
06
06A
06B
06D
06E
06F
06G
07
07A
07B
07C
07D
07E
07F
07G
07H
Does your proposed project involve a public event?*

**Choices**

Yes
No

**Date(s) of the open to the public event(s).**

Enter all individual event dates separated by a comma.

*Character Limit: 250*

**If yes, include the name(s) and address(es) of the event location(s).**

*Character Limit: 250*

**Adult Artists Participating**

Estimated number of adult artists directly involved in or providing art or artistic services specifically identified with grant activities.

*Character Limit: 10*

**Children/Youth Benefiting**

Estimated number of children and youth under the age of 18 participating in and/or benefiting directly from these grant activities, or included in an audience.

*Character Limit: 10*

**Adult Audience Benefiting**

Estimated number of adult audience participants benefiting directly from grant activities.
Character Limit: 10

**Total Organization Expenses**
List the total organization expenses for the most recently completed fiscal year.
*Character Limit: 20

**Organization's Total Arts Budget for Previous Fiscal Year:**
Or Department Budget if you are at a school or unit of Government.
*Character Limit: 20

**Fiscal Year**
What is the organizations fiscal year used in the above question?
*Character Limit: 4

**Total Project Expenses**
*Character Limit: 20

**Cash Expense of Project**
This number should be the project total cost minus the amount of any in-kind revenue listed in your budget.
*Character Limit: 20

**Full Time Equivalents (FTE) to be funded:**
For project grants ECRAC expects this to be zero.
*Character Limit: 10

**Project In-Kind**
This number should be the amount of any in-kind revenue listed in your budget.
*Character Limit: 20

**Start Date**
The starting date should be approximately one month before your project is to take place or before you have to contract for services. *(This date cannot be before the grant deadline's earliest possible starting date listed in the guidelines.)*
*Character Limit: 10

**End Date**
The ending date should be approximately one month after the actual completion date of your project to allow time to close out all aspects of the project before submitting your final report.
*Character Limit: 10

**Counties Impacted**
Please provide a list of counties (Minnesota only) that will be impacted by this project.
Character Limit: 500

Board Members*
Please provide a list of Board Members. Enter first and last name only, separated by commas.

Character Limit: 1000

Contact staff via email at grantinfo@ecrac.org or by telephone at 320-591-7034 if you have any questions or concerns regarding your application. If requested early enough in advance of the grant deadline, ECRAC staff can review your draft application.

Thank you for applying! ECRAC staff wishes you all the best.