

# *Hinesville Area Arts Council Service Grants and Sponsorship*

Dear Applicant,

Please review the following information in full first to determine whether or not your organization or you may qualify for a Council Service Grant, Scholarship or Sponsorship. Once you have determined which program best fits the requirements of your request, complete the attached application package and return the information to the Council Grants Chair at the address listed on the final page of the application. Contact information concerning question about the application or process is included below.

## **Grants**

1. Are reserved for registered 501(c)(3) non-profit use or scholarship requests.
2. Applicants are required to be legal residents of Liberty County, Georgia.
3. Fund matching is required for non-scholarship Grant requests
4. Grants are theoretically limited to the financial ability of the Council
5. The grant product must both meet the mission of the Hinesville Arts Council and provide benefit to the Liberty County community.
6. Applicants should be independent and not covered under the financial shelter of any other governmental organization.
7. Scholarship grants will be issued to High School Seniors in any public or private school in Liberty County, Georgia who will be pursuing a collegiate degree in an arts discipline with an accredited institution.

## **Sponsorship**

1. Are reserved for “for profit” arts endeavors conducted within Liberty County, Georgia
2. Does not require County residency
3. Award amounts are limited to \$1,500
4. The sponsored product must both meet the mission of the Hinesville Arts Council and provide benefit to the Liberty County community.

*For More information, please contact the Grants Chair at:*

# Hinesville Area Arts Council Service Grants and Sponsorship

## **DEFINITIONS**

**Grants-** A request for Arts Council funding from a qualified, non-profit organization or individual, or scholarship for an individual.

**Sponsorship-** A request for Arts Council funding from a “for profit” qualified organization or individual.

**Council-** The Hinesville Area Arts Council

## **COUNCIL GRANTS**

### **I. Eligibility**

1. Applicants must be legal residents of Liberty County, Georgia
2. Applicant organizations or non-scholarship individuals must have registered 501(c)(3) non-profit status.
3. The product of the grants must both meet the mission of the Hinesville Arts Council and provide benefit to the Liberty County community.
4. Applicants should be independent and not covered under the financial shelter of any other governmental organization.
5. Scholarship grants will be issued to High School Seniors in any public or private school in Liberty County, Georgia who will be pursuing a collegiate degree in an arts discipline with an accredited institution.

### **II. Funding Restrictions**

1. Grant availability is determined in part based on the funding abilities of the Council. Some qualifying grants may not be considered based on this reality.
2. Previous financial support from the Council does not guarantee subsequent or future funding.
3. Grants **will not** be issued for the following:
  - a. Offset of existing deficits
  - b. Receptions or prizes
  - c. For-profit endeavors
  - d. Out-of-area tours, exhibits or performances

### **III. Matching Requirements**

1. There will be no matching requirement for scholarship grants
2. Grants will be matched 1 to 1 if the organization or individual's budget for the consideration is \$5,000 or more. That is to say that for every dollar requested from the Council, the requestor must be investing a dollar into the endeavor.

3. Grants will be matched 2 to 1 if the organization or individual's budget for the consideration is less than \$5,000. That is to say that for every two dollars requested from the Council, the requestor must be investing a dollar into the endeavor.

#### **IV. The Application Process**

1. The application process for Eligible requestors will proceed as follows:
  - a. The applicant contacts the Council or Grants Chair to request an application package.
  - b. The completed application is returned to the Grants Chair at least three (3) months in advance of the scheduled event.
  - c. The Grants Chair and Committee will meet to screen the application to ensure that eligibility requirements are met.
  - d. The Grants Chair and Committee will review and score submitted applications. Applicants may be required to submit additional information, documentation or explanation. The requests for additional information will only be made to ensure that the request is fully understood.
  - e. The Grants Chair and Committee will present the qualified application to the Board of Directors for vote.
    - i. Grants may be denied by the Board of Directors based on financial ability.
  - f. Applicants will be notified at least two (2) months prior to the scheduled endeavor of the decision of the Board of Directors.
  - g. Denied applicants may appeal the decision of the Board of Directors by writing the Council Chairperson within thirty (30) days of receiving the denial.
  - h. Grounds for appeal are limited to the following:
    - i. Procedural error by staff or committee
    - ii. Violation of the Council's own policies.
  - i. Aesthetic judgment of the Council and its Committee will not be considered for appeal.
  - j. In the event that the Board Chairperson deems that a conforming, substantive appeal has been filed, the item will be redressed by the Board of Directors and a final ruling based on the merits will be offered within thirty (30) days.

#### **V. Fund Distribution**

1. A request for fund distribution should be made to the Council at least thirty (30) days before the funds will be needed.
2. Grantees can request up to 80% of the allocated amount.
3. The remaining 20% will be paid when the final report is submitted.
  - a. The final report should be submitted no later than thirty (30) days after the conclusion of the event for which the Grant was given.
  - b. The final report should include a narrative of the endeavor, the actual financial budget and supporting documentation.

## **VI. The Application and Attachments**

1. Applicants are required to submit the following documents in order to be considered for a Council Grant:
  - a. The Grant/Sponsorship Application
  - b. A brief (one page maximum) outline of the requesting organization or individual's goals and objectives for the Grant Period.
  - c. A detailed description of the Grant request (one page maximum).
  - d. A Community Impact Assessment- A description of how your endeavor will impact the Liberty County community quality of life, what outreach efforts will be used to develop audience diversity and what steps are in place to address the needs of special audiences.
  - e. A copy of the organizational or individual 2008-2009 operating budget, revenue and expenses with a comparison to the 2008 budget and the 2007 actual in a three column format.
  - f. List of the organization's Board of Directors (if any) with addresses and business affiliations.
  - g. Scholarship applicants must include a copy of their High School transcripts and letter of recommendation.

### **COUNCIL SPONSORSHIPS**

#### **I. Eligibility**

1. Applicant organizations or individuals may not be registered 501(c)(3) non-profit entities.
2. The product of the sponsorship must both meet the mission of the Hinesville Arts Council and provide benefit to the Liberty County community.
3. Applicants should be independent and not covered under the financial shelter of any other governmental organization.

#### **II. Funding Restrictions**

1. Sponsorship availability is determined in part based on the funding abilities of the Council. Some qualifying requests may not be considered based on this reality.
2. Previous financial support from the Council does not guarantee subsequent or future funding.
3. Sponsorships **will not** be issued for the following:
  - a. Offset of existing deficits
  - b. Receptions or prizes
  - c. Non-profit entities
  - d. Out-of-area tours, exhibits or performances

#### **III. Matching Requirements**

1. There will be no matching requirement for Sponsorship.
2. Sponsorship support is capped at \$1,500 per request.

#### **IV. The Application Process**

1. The application process for Eligible requestors will proceed as follows:
  - a. The applicant contacts the Council or Grants Chair to request an application package.
  - b. The completed application is returned to the Grants Chair at least three (3) months in advance of the scheduled event.
  - c. The Grants Chair and Committee will meet to screen the application to ensure that eligibility requirements are met.
  - d. The Grants Chair and Committee will review and score submitted applications. Applicants may be required to submit additional information, documentation or explanation. The requests for additional information will only be made to ensure that the request is fully understood.
  - e. The Grants Chair and Committee will present the qualified application to the Board of Directors for vote.
    - i. Sponsorship may be denied by the Board of Directors based on financial ability.
    - ii. Applicants will be notified at least two (2) months prior to the scheduled endeavor of the decision of the Board of Directors.
  - c. Denied applicants may appeal the decision of the Board of Directors by writing the Council Chairperson within thirty (30) days of receiving the denial.
  - d. Grounds for appeal are limited to the following:
    - i. Procedural error by staff or committee
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  - e. Aesthetic judgment of the Council and its Committee will not be considered for appeal.
  - f. In the event that the Board Chairperson deems that a conforming, substantive appeal has been filed, the item will be redressed by the Board of Directors and a final ruling based on the merits will be offered within thirty (30) days.

#### **V. Fund Distribution**

1. A request for fund distribution should be made to the Council at least thirty (30) days before the funds will be needed.

#### **VI. The Application and Attachments**

2. Applicants are required to submit the following documents in order to be considered for a Council Sponsorship:
  - a. The Grant/Sponsorship Application
  - b. A brief (one page maximum) outline of the requesting organization or individual's goals and objectives for the Sponsorship Period.
  - c. A detailed description of the Sponsorship request (one page maximum).

- d. A Community Impact Assessment- A description of how your endeavor will impact the Liberty County community quality of life, what outreach efforts will be used to develop audience diversity and what steps are in place to address the needs of special audiences.
- e. A detailed cost of the organizational or individual's event budget.
- f. List of the organization's Board of Directors (if any) with addresses and business affiliations.

**(Section A: General Information)**

Requestor's Name \_\_\_\_\_  
Last First MI

Organization Name \_\_\_\_\_

Address \_\_\_\_\_  
Street Number/Name (No P.O. Boxes Accepted)

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code

Telephone ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_ Email Address \_\_\_\_\_

**(Section B: Service Type)**

Grant (Complete Section C, E)     Scholarship (Complete Section D, E)     Sponsorship (Complete Section C, E)

**(Section C: Grant Application Information)**

Project Summary- Leave no lines incomplete. When a question does not apply, please indicate so by inserting "N/A" in the appropriate field.

Name of Project \_\_\_\_\_

Anticipated Project Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Location \_\_\_\_\_  
Month Day Year

Total Cost of Project \$ \_\_\_\_\_ . \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_ . \_\_\_\_\_

Purpose or Use of Amount Requested \_\_\_\_\_

**Operating Support**

	FY 2007 Actual Budget	FY 2008 Approved Budget	FY 2009 Projected Budget
<b>Revenue</b>			
<b>Expense</b>			
<b>Net</b>			
<b>% of Budget for Programming</b>			
<b>% of Budget for Admin Cost</b>			

Number of Staff \_\_\_\_\_

**(Section C: Grant Application Information, *Continued*)**

Number of Artists Participating \_\_\_\_\_ Number of Georgia Artists Participating \_\_\_\_\_

Total Audience Estimate \_\_\_\_\_

**Anticipated Audience Breakdown by Percentage**

Children	Senior Citizens	Minorities	Disabled	General

Will the Facilities be accessible to the Disabled?       Yes       No

If "No", please state why \_\_\_\_\_

What specific services will you provide to audience members with disabilities?  
\_\_\_\_\_  
\_\_\_\_\_

What methods will you use to attract minority participation?  
\_\_\_\_\_  
\_\_\_\_\_

How will your programming meet the cultural needs of the Liberty County Community?  
\_\_\_\_\_  
\_\_\_\_\_

**(Section D: Scholarship Application Information)**

Name of School You Will Be Attending \_\_\_\_\_

Location of School \_\_\_\_\_  
Street Number and Name (No P.O. Boxes Accepted)

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Have you been accepted to this school?       Yes       No

Field of Study you intend to pursue \_\_\_\_\_

What schools do you currently attend? \_\_\_\_\_ What Grade? \_\_\_\_th

What is your current GPA? \_\_\_\_\_ out of \_\_\_\_\_

