



ACTION MICRO-GRANT APPLICATION

Mission of the Arts Council. The Rockford Area Arts Council supports, promotes, and develops access to the arts for everyone. The Arts Council is the collective voice of individual artists and regional arts organizations; We believe in the transformative power of the arts and its ability to set the tone for a region's creative and cultural infrastructure.

Action Grants Program. The program is designed to benefit artists and advocacy organizations by awarding microgrants, up to \$500, for creative endeavors throughout the region. Preference will be given to first-time applicants and/or unique projects. Grant submission deadlines are three times/year.

What We Fund:

- Artists and/or organizations accomplishing new/unique art projects/initiatives
- Projects that nurture the development of artists and arts organizations
- Projects that support the increased quality and quantity of arts for youth
- Projects that increase and expand the promotion, visibility, and accessibility of the arts for everyone, particularly underserved populations

What We Do Not Fund:

- Operating support or deficit funding
- Capital improvements, permanent equipment, construction
- Fundraisers, benefits, receptions, or other social functions
- Programs that require or promote religious activity as a condition for participation
- Out-of-state touring
- College or university academic program or scholarships
- Salaried positions

Application Evaluation Process:

- Support of artists and arts organizations in accomplishing new art projects
- Artistic merit and excellence
- Degree to which project fulfills its purpose
- Quality of planning and implementation
- Projects based on the What we Fund section, listed above



ACTION MICRO-GRANT APPLICATION

Email completed application to info@artsforeveryone.com

Organization or Individual's Name:

Mission Statement of Organization or Individual:

Project Goal:

Amount Requested: \$

Proposed Project Description:

Total Cost of Project: \$

Proposed Project Time-frame (estimated start date + completion date):

(more)

ACTION MICRO-GRANT APPLICATION CONT'D

Contingency Plan (will the project be able to go forward if full funding is not received?):

Please Attach:

- Examples of past projects
- Resume, list of Board of Directors, or letter of support from community/organization leader

Certification:

I certify that the information contained in this application, including all attachments, and supporting materials, is true and correct to the best of my knowledge.

Printed Name:

Signature:

Date:

Phone Number:

Email: