

**How to Submit Your Application**

<p><b>Please type in minimum 11-point font.</b> Use the space provided – 3 pages total. Submit <b>one signed copy.</b>  <b>Mail to:</b> Office of Arts &amp; Cultural Affairs, smART ventures, P.O. Box 94748, Seattle, WA 98124-4748  <b>Hand delivery/FedEx/UPS:</b> 700 5<sup>th</sup> Ave., Suite 1766, Seattle  <b>E-mail is fine:</b> <a href="mailto:danielle.abbott@seattle.gov">danielle.abbott@seattle.gov</a> <b>IMPORTANT: If e-mailing, you must scan or fax signed page 3.</b></p>		
<p><b>Contact &amp; Project Information</b> (please be as complete and specific as possible)</p>		
<p>Applicant Name (individual or organization):</p>		
<p><input type="checkbox"/> Are you applying with a fiscal sponsor? If yes, NAME:</p>		
<p>Project Contact Person:</p>		<p>Title:</p>
<p>Address:</p>		
<p>City:</p>	<p>State:</p>	<p>Zip:</p>
<p>Phone (work or daytime): ( )</p>		<p>E-mail:</p>
<p>Home neighborhood:</p>		<p>Neighborhood of Project:</p>
<p><b>Person who will sign contract and invoice</b> ("Authorized Representative") if different from Applicant or Contact person:</p>		
<p>Name:</p>		<p>Title/Relationship to Project:</p>
<p>Tax Identification # (organization):</p>		<p>(Individuals will be asked for a Social Security # if funded.)</p>
<p>Have you had a phone consultation with a project manager? <input type="checkbox"/> yes <input type="checkbox"/> no</p>	<p>Project Manager Name:</p>	<p>Does this project require insurance? <input type="checkbox"/> yes <input type="checkbox"/> no</p>
<p>Are you now being funded by another program of the Office of Arts &amp; Cultural Affairs? <input type="checkbox"/> yes <input type="checkbox"/> no</p>		<p>If yes, what program?</p>
<p>Project Title:</p>		<p>Amount Requested: \$</p>
<p>Does this project represent any underserved group(s) or community of interest? <input type="checkbox"/> yes <input type="checkbox"/> no</p>		<p>If yes, please name:</p>
<p>Project Start Date: (Note: We can only fund activity taking place <u>after</u> a contract award.)</p>		<p>Project End Date:</p>
<p>Location:</p>	<p>Event Date(s):</p>	<p>Ticket Price(s):</p>

**Description of Project** Tell us about your project, opportunity or event. List key activities and goals.

Individual/Organization Name:	
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**Project Impact – What Will Be Accomplished? Who Will Be Served?**

1) Talk specifically about how your project will fulfill one or more of the following (do not respond to all):

- Provide a one-time arts/culture opportunity
- Use one-time funds to start or complete a project
- Expand or diversify audience for arts/culture
- Serve under-represented artists, cultural groups
- Build community relations through arts/culture
- Meet a community need or goal through arts/culture

2) Describe exactly how you will reach your intended audience.

**Project Feasibility**

Tell us why you believe you can complete this project. (May include qualifications, past success, strong partnerships or supporters, taking advantage of an existing event, etc.) List key participants or partners.

**Need for smART venture funds** What difference will these funds make to your project?

(Note: May not be used for equipment purchases, food and drinks or fundraising.)

**\*\*Optional, but Strongly Encouraged** – You may attach no more than two pieces of supporting material – such as a sample of artistic work, brochure, newsletter, past review, support letters – to your completed application. Or, if applicable, you may provide the address for your web site or YouTube link.

Individual/Organization Name:	
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**Budget – EXPENSES**

\*Non-Cash or “In-Kind” = expenses you would normally pay cash for, which are being donated. This can include all or part of staff compensation, ad space, rents, materials, etc.

ITEM <i>(PLEASE GIVE DETAILS – e.g. 3 artists X \$25 per hour)</i>	Cash	Non-Cash*
1. Project Staff/Personnel (Non-Cash includes volunteers contributing time)		
2. Materials/Supplies/Rentals		
3. Publicity/Marketing		
4. Other (such as transportation; business license fees; insurance, if needed)		
<b>Sub Totals, Cash &amp; Non-Cash</b>		
<b>TOTAL EXPENSES</b> <small>(Cash + Non-Cash = Total Expenses. Total Expenses must equal Total Income)</small>	\$	

**Budget – INCOME**

\* Non-Cash or “In-Kind” = any donated portion of expense you would normally pay cash for. Non-Cash income should equal the amounts shown above under Non-Cash Expenses.

Income Source (list applicable sources)	Cash	Non-Cash*	Confirmed (yes/no)
Ticket Sales (State how many tickets you expect to sell to raise the income shown - e.g. 200 tickets X \$15): Other (explain - concessions, ads, t-shirts, CDs)			
Donations from Individuals			
Donations from Businesses, Foundations, other Government sources. (list)			
Other (list)			
smART ventures funding request			
<b>Sub-Totals, Cash &amp; In-Kind</b>			
<b>TOTAL INCOME</b> <small>(Cash + Non-Cash = Total Income. Total Income must equal Total Expenses)</small>	\$		

By signing, I declare that the above information is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant or Authorized Representative

\_\_\_\_\_  
Date

If you are e-mailing your application, scan the signed page or FAX to (206) 684-7172.