



## James River Arts & Cultural District Program Funding Application

<b>Project Title</b>		
<b>Applicant Organization/Individual</b>		<b>Address of Organization/Individual</b>
<b>Employer Identification Number (if applicable)</b>		
<b>Is Applicant:</b> <input type="checkbox"/> an Individual <input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> For-Profit Entity <input type="checkbox"/> Other (Please Explain)		
<b>Project Start Date:</b>	<b>Project End Date:</b>	<b>Est. Attendance (if applicable):</b>
<b>Requested Grant Amount:</b>	<b>Total Project Cost:</b>	
	<b>PROJECT LEADER</b>	<b>Organization Director (if applicable)</b>
<b>Full Name</b>		
<b>Title</b>		
<b>Organization</b>		
<b>Telephone Number</b>		
<b>Fax Number</b>		
<b>E-Mail Address</b>		
<b>Mailing Address</b>		
<b>Web Address</b>		
<b>Signature</b>		
<b>Date</b>		

## **Project Summary**

Briefly describe the project for which you are requesting an Arts & Cultural Project Grant. Be sure to include details such as date, time and expected project completion. If this is a multi-year project, please provide details on previous achievement.

What other individuals or organizations are you collaborating with? Please list and describe the relationship.

How does this project or activity provide a new or innovative offering in the Arts District? How is the project or activity inclusive and reaching new arts audiences?

### **Estimated Economic Impact and Benefit to the Public**

Describe how this project will enhance the Arts & Cultural District, and explain the project's benefit to the citizens of Lynchburg.

Provide an estimated economic impact for the project; for assistance with this estimate, applicants can utilize the Americans for the Arts "Arts & Economic Prosperity Calculator," [available online here](#). The City of Lynchburg Office of Economic Development can assist applicants when requested.

## Sources of Project Funds

If necessary, duplicate or modify this page to accommodate additional sources.

### State

Agency Name: \_\_\_\_\_  
Amount Received: \$ \_\_\_\_\_  
Status \_\_\_\_\_  
Purpose \_\_\_\_\_

### Federal

Agency Name: \_\_\_\_\_  
Amount Received: \$ \_\_\_\_\_  
Status \_\_\_\_\_  
Purpose \_\_\_\_\_

### Local

Name of Locality: \_\_\_\_\_  
Amount Received: \$ \_\_\_\_\_  
Status \_\_\_\_\_  
Purpose \_\_\_\_\_

### Private

Source(s): \_\_\_\_\_  
Amount: \$ \_\_\_\_\_  
Status \_\_\_\_\_  
Purpose \_\_\_\_\_

### Other

Source(s): \_\_\_\_\_  
Amount: \$ \_\_\_\_\_  
Status \_\_\_\_\_  
Purpose \_\_\_\_\_



**Budget Narrative**

List all income and expenses and specifically describe how funds will be used. Detail all indirect costs and identify any in-kind contributions. Explain estimates used.

Explain how, when, and by whom the sources of funds will be obtained and managed.

## Authorization

By signing this Application, the Authorizing Agent is guaranteeing that the information contained in this Application is correct and verifiable. The Authorizing Agent is affirming that the funds requested herein will be used for the specific purpose outlined in this Application and for no other purpose. Providing false, inaccurate or misleading information or the use of grant funds for other than the expressed purpose will result in disqualification from consideration and forfeiture of any grant awarded. Upon grant approval, the Authorizing Agent agrees to sign a Grant Disbursement Agreement that may include an audit of grant expenditure.

Name of Requesting Entity: \_\_\_\_\_

Name of Authorizing Agent: \_\_\_\_\_

Title of Authorizing Agent: \_\_\_\_\_

Address of Authorizing Agent: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Signature of Authorizing Agent: \_\_\_\_\_

Date: \_\_\_\_\_