



CMAB
Central MN Arts Board

INDIVIDUAL ARTIST AWARD APPLICATION

Application Deadlines:

FY2010

Wednesday, March 10, 2010
Board Review Date: April 12, 2010

FY2011

Wednesday, March 9, 2011
Board Review Date: April 11, 2011

Applications must be in the CMAB office by 4:30pm on the deadline date

220 4th Avenue North, PO Box 458
Foley, MN 56329
320-968-4290 1-866-345-7140 fax: 320-968-4291
www.centralmnartsboard.org



INDIVIDUAL ARTIST AWARD
APPLICATION

DO NOT HAND WRITE THIS APPLICATION. You may recreate this application on a blank piece of paper if you are unable to download the application form. Submit **1 ORIGINAL and 8 COPIES of the whole application** to the CMAB, 220-4th Avenue North, P.O. Box 458, Foley, Minnesota 56329 by 4:30 P.M. on deadline date

SECTION A: Artist Information

FULL NAME: _____ **DATE:** _____

ADDRESS (STREET, CITY, STATE and ZIP CODE): _____

TELEPHONE: _____

EMAIL ADDRESS: _____

COUNTY WHERE APPLICANT LIVES: (Benton, Sherburne, Stearns & Wright only) _____

Certification Statement:

"My signature below certifies that I meet all the eligibility requirements listed in the guidelines, that all the information contained in this application and its attachments is true, the work samples are created solely by me, and that I have submitted a complete application. **In addition, if I have not enclosed a stamped, self-addressed return envelope, or made arrangements with the CMAB to pick up my work samples within 30 days of the award date, I understand my work samples will not be returned. I also understand that written work samples will not be returned.**"

Applicant Signature _____ Date _____

SECTION B: Artist Work Samples
SECTION C: Work Sample Description

SAMPLES OF WORK DESCRIPTION LIST (Note: do not hand-write description)

Jane Doe
2110 Potter Kiln Road
Apartment #10
St. Cloud, MN 56301
Phone: 320-253-9517

Slides

3-Dimensional Example

| <u>No.</u> | <u>Title</u> | <u>Description</u> | <u>Size (h" x w" x d")</u> |
|------------|-----------------------|------------------------|----------------------------|
| 1. | Woman With Toothache. | Cast Bronze/Side View* | 20" x 7" x 5" |
| 2. | Woman With Toothache. | Cast Bronze/Top View* | 20" x 7" x 5" |

*Note: multiple views of the same object are optional. You may also include just one view of each object.

2-Dimensional Example

| <u>No.</u> | <u>Title</u> | <u>Description</u> | <u>Size (h" x w")</u> |
|------------|--------------|------------------------|-----------------------|
| 1. | The Letter | Oil On Canvas Painting | 24" x 36" |

OR

Longer Written Work

1. "Pennies From Heaven." A novel, from chapter 4, pp. 1-14.

OR

Poems

1. "I Walk Alone."
2. "Cold And Walking."
3. "Today I Walk."

OR

Music*

1. Title: "In The Mood."
2. Title: "To Ride, Shoot Straight & Speak The Truth."
3. Title: "Falling Away From Me."

*Be sure to put your name, song title, and corresponding number on each sheet of scored music.

SECTION D: Artist Statement

I. RAC GRANT DATA COLLECTION FORM

TO THE APPLICANT: This form is used to gather information about grant applicants to the Minnesota Regional Arts Councils (RACs). The data is maintained by the Minnesota State Arts Board in cooperation with the RACs, and may be distributed to others in accordance with the Minnesota Data Practices Act. Complete information is necessary to ensure the reliability of our data. *Note: If you are using a fiscal agent, please fill out this first page as it pertains to the arts organization conducting the activity, not the fiscal agent.*

1. APPLICANT INFORMATION

Date _____

Legal name of organization or individual _____
 Professional or other name _____
 Address _____
 City _____ State _____ Zipcode _____
 Day phone _____
 E-mail address _____
 Contact person name and title _____
 County _____ MN House district _____ U.S. Congressional district _____
 Fiscal agent name (if applicable) _____

2. SPECIAL CHARACTERISTICS:

For individuals applying (optional)
 Select any combination that applies describing your racial/ ethnic characteristics. This information is not made public.

- American Indian/Alaska Native (N)
- Asian (A)
- Native Hawaiian/Pacific Islander (P)
- Black/African American (B)
- Hispanic/Latino (H)
- White (W)
- Other _____

For individuals, mark these items if they apply (optional)

- Disability (I)
- Older Adult - 60+ (S)
- Veteran (V)

For organizations applying
 Select the one code that best represents 50% or more of your staff or board or membership

3. STATUS:

Select the one code which best describe the applicant's legal status

- | | | |
|---------------------------|---|-------------------------|
| 01 Individual | 04 Government-Federal | 07 Government-County |
| 02 Organization-Nonprofit | 05 Government-State (includes public schools) | 08 Government-Municipal |
| 03 Organization-Profit | 06 Government-Regional | 09 Government-Tribal |
| | | 99 None of the Above |

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4. INSTITUTION:

Select the one code which best describe the applicant

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| 01 Individual artist | 18 Union/Professional Association | 36 Seniors Center |
| 02 Individual non-artist | 19 School-District | 37 Parks & Recreation |
| 03 Performing Group | 20 School-Parent/Teacher Assn | 38 Government-Executive |
| 04 Performing Group-College/University | 21 School-Elementary | 39 Government-Judicial |
| 05 Performing Group-Community | 22 School-Middle | 40 Government-Legis (House) |
| 06 Performing Group-Youth | 23 School-Secondary | 41 Government-Legis (Senate) |
| 07 Performance Facility | 24 School-Vocational or Technical | 42 Media-Periodical |
| 08 Museum (Art) | 25 School-Other (incl Community Ed) | 43 Media-Daily Newspaper |
| 09 Museum (Other) | 26 College/University | 44 Media-Weekly Newspaper |
| 10 Gallery/Exhibition space | 27 Library | 45 Media-Radio |
| 11 Cinema | 28 Historical Society/ Commission | 46 Media-Television |
| 12 Independent Press | 29 Humanities Council/Agency | 47 Cultural Series Organization |
| 13 Literary Magazine | 30 Foundation | 48 School of the Arts |
| 14 Fair/Festival | 31 Corporation/ Business | 49 Arts Camp/ Institute |
| 15 Arts Center | 32 Community Service Organization | 50 Social Service Organization |
| 16 Arts Council/Agency | 33 Correctional Facility | 51 Child Care Provider |
| 17 Arts Service Organization | 34 Health Care Facility | 99 None of the Above |
| | 35 Religious Organization | |

Legal name of organization or individual _____

5. **DISCIPLINE:**

Select one code which best describes the applicant's primary area of interest in the art (e.g. ballet 01A)

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| <ul style="list-style-type: none"> 01 Dance—general <ul style="list-style-type: none"> 01A ballet 01B ethnic/jazz/folk-inspired 01C modern 02 Music—general <ul style="list-style-type: none"> 02A band 02B chamber 02C choral 02D new-experimental, electronic 02E ethnic/folk-inspired 02F jazz 02G popular 02H solo/recital 02I orchestral 03 Opera/Musical Theater—general <ul style="list-style-type: none"> 03A opera 03B musical theater 04 Theater—general <ul style="list-style-type: none"> 04A theater, in general 04B mime 04C puppetry 04D theater for young people 04E storytelling 04F playwriting/scriptwriting | <ul style="list-style-type: none"> 05 Visual Arts —general <ul style="list-style-type: none"> 05A experimental 05B graphics (include drawing, cartooning, printmaking, book arts) 05D painting 05F sculpture 06 Design Arts —general <ul style="list-style-type: none"> 06A architecture 06B fashion 06D industrial 06E interior 06F landscape architecture 06G urban/ metropolitan 07 Crafts—general <ul style="list-style-type: none"> 07A clay (includes ceramics) 07B fiber (includes basketry) 07C glass 07D leather 07E metal 07F paper 07G plastic 07H wood 07I mixed media 08 Photography (include holography) | <ul style="list-style-type: none"> 09 Media Arts —general <ul style="list-style-type: none"> 09A film 09B audio 09C video 09D technology/experimental 09E screenwriting 10 Literature—general <ul style="list-style-type: none"> 10A fiction 10B non-fiction 10C playwriting/ scriptwriting 10D poetry 11 Interdisciplinary (include collaborations & performance art) 12 Folklife/Traditional Arts, in general <ul style="list-style-type: none"> 12A Dance 12B Music 12C Crafts and visual arts 12D Oral traditions 13 Humanities 14 Multi-disciplinary 15 Non-arts/non-humanities |
|---|--|---|

PROJECT ACTIVITY

6. _____ **Adult Artists Participating** Record the number of adult artists expected to be directly involved in providing art or artistic services for these grant activities.
7. _____ **Children/Youth Benefiting** (*Individual Artist need not complete.*) Record the number of children and youth under the age of 18 expected to participate in and/or benefit directly from these grant activities, or were included in the audience (*excluding broadcast figures*). Do not double-count repeat attendees.
8. _____ **Total Audience Benefiting** (*Individual Artist need not complete.*) Record the number of audience members, **adult and youth**, expected to benefit directly from these grant activities (excluding employees, paid performers, artists participating, and broadcast figures. Do not double-count repeat attendees.
9. **Project Discipline** Using the same discipline coding listed above, select one category which best describes the grant activity.

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10. For organizations applying, **total organization expenses** for most recently completed fiscal year: (*Individual Artist need not complete.*)
 \$ _____ FY _____

CENTRAL MN ARTS BOARD INDIVIDUAL ARTIST AWARD

APPLICATION CHECKLIST

Applicants are strongly encouraged to review and place an “X” once completed in the following boxes prior to submitting your application.

- INDIVIDUAL ARTIST application** is complete and the original is signed with original labeled.
- 8-collated/stapled copies include:** (Do not include application instructions)
 - Individual Artist Application page
 - Work Sample Description
 - Artist Statment
- RAC DATA** form
- Work Sample** (as defined in Individual Artist Award Guidelines)
- You made a copy for your records.
- INDIVIDUAL ARTIST APPLICATIONS ARE DUE BY 4:30 P.M.**
- Mail application to: CMAB
220-4th Avenue North
P.O. Box 458
Foley, Minnesota 56329
- Applications may be hand delievered to the CMAB Office; a drop box is available for use after hours.

Once the CMAB receives your application, staff will check for eligibility. Applications will sent to the CMAB Board of Directors or the CMAB Grant Panel at least two-weeks prior to the review date.

Review of eligible applications typically takes place within one month of the deadline. Check the CMAB website for the specific date as it relates to the deadline under which you applied.

- All applicants will be contacted concerning scheduling the required Review Session; time, date, at the Central Minnesota Arts Board Office.
- All applicants will be notified one way or another as soon as possible after decisions have been made.