2023-24 State of the Arts Grants

St. Johns County Cultural Council

Basic Information

Today's Date*

Character Limit: 10

Name of Proposed Activity(ies)*

Character Limit: 100

Begin Date of Proposed Activity(ies)*

Character Limit: 10

End Date of Proposed Activity(ies)*

If a one-day event, please enter the same date as the Begin Date.

Character Limit: 10

Location of Proposed Activity(ies)*

Character Limit: 100

Have you received a SOTA grant before?*

Choices

Yes

No

Received previous SOTA grant

When were funds received?*

Date can be approximate.

Character Limit: 10

Date final report submitted*

As a previous awardee, you must submit a final report to be eligible to apply. Date can be approximate.

Character Limit: 10

Project Narrative

Project Description*

Describe the proposed activity(ies) of your project.

Character Limit: 5500

When and Where*

Describe when and where the project/activity(ies) will take place. Provide an event schedule if appropriate.

Character Limit: 3000

Target Audience*

Describe who your target audience will be and how you will reach them.

Character Limit: 3000

Project Team*

List all the project team members and their titles/roles in this activity or activities.

Character Limit: 2500

Team Bios*

Please upload a file that includes a brief bio for each project team member.

File Size Limit: 1 MB

Why fund this project?*

How does this proposed project meet the State of the Arts funding criteria? Why should it receive Cultural Council funding?

Character Limit: 5500

Project Goals*

Describe the goals of the proposed project.

Character Limit: 2500

Achievement and Evaluation*

Detail how these goals will be achieved. How will you evaluate success?

Character Limit: 5500

Support Materials

Program Quality

Upload an example of program quality with a brief description.

Character Limit: 500 | File Size Limit: 2 MB

Program Quality 2

Upload an example of program quality with a brief description.

Character Limit: 500 | File Size Limit: 2 MB

Support Letters

Upload a maximum of three support letters in one document. A letter from the school principal is required for teachers completing their activity(ies) at a school.

File Size Limit: 2 MB

Project Budget

Budget Information

This year the Cultural Council will award up to six \$1,500 grants. There are no matching requirements. The grant request can either fully fund the proposed program/project or supplement its budget.

Total Project Income*

If you have other funding sources, include the grant request amount (\$1,500) in the total. If no other funding sources, the total will be \$1,500.

Do not include \$ or comma in your entry.

Character Limit: 20

Other funding sources*

Please list additional funding sources and their amounts. Example:

Wells Fargo - \$1,000 Personal/Organization Funds - \$1,000

If none, please enter N/A.

Character Limit: 750

Total Project Expense*

Enter your total project expense here. Itemize the expenses in the input boxes below.

Character Limit: 20

Supplies/Materials*

If none, enter 0

Character Limit: 20

Equipment*

If none, enter 0

Character Limit: 20

Artistic Fees*

If none, enter 0

Character Limit: 20

Instructor Fees*

If none, enter 0

Character Limit: 20

Marketing and Advertising*

If none, enter 0

Character Limit: 20

Printing*

If none, enter 0

Character Limit: 20

Postage*

If none, enter 0

Character Limit: 20

Travel/Transportation*

If none, enter 0

Character Limit: 20

Other description

If you have an expense that is not in one of the above expense categories, please itemize that here.

Character Limit: 250

Other amount*

If none, enter 0

Character Limit: 20

Signature

Sign below to confirm the validity of the information submitted on this State of the Arts Grant application.

First and Last Name*

Typing your name constitutes an electronic signature.

Character Limit: 250