



## **Special Project Grant**

*A grant program of the Florida Keys Council of the Arts.*  
Sponsored in part by the Florida Keys Council of the Arts, the State of Florida, Department of State, Division of Cultural Affairs, the Florida Arts Council, the National Endowment for the Arts, and private donations.

The Special Project Grant is a grant for Florida Keys arts organizations and individual artists in Monroe County.

**The purpose of a Special Project Grant is to provide short-term support to vital, creative projects that do not fit into the other grant categories.**

Special project funding is limited to once in three years.  
Applications are reviewed on a rolling basis.  
The review process may take up to two months or longer for determination.

Funding is available up to \$1,000 per request.  
Requests greater than \$1,000 will be considered depending on funds available at the time of the request.  
Applicants should not expect a response for at least 60 days.

## **Application Procedures**

The application must be typed or printed legibly in dark ink.

Mail or deliver **one original** application and **five copies for a total of six (6)** to:

Special Project Grant  
Florida Keys Council of the Arts  
1100 Simonton St.  
Key West, FL 33040

The project must be completed within a year.  
The grantee will receive monies on a reimbursement basis,  
upon completion of a program report.  
The grantee's final report will include photographs and written material  
documenting the project.

**All publicity about the project must include the  
Arts Council logo and the following credit line:**

*This project is sponsored in part by the Florida Keys Council of the Arts,  
the State of Florida, Division of Cultural Affairs, the Florida Arts Council,  
the National Endowment for the Arts, and private donations.*

An Arts Council board or staff member may visit any funded project.

*A statement regarding the application review process is available upon request.*

### **Contact information:**

Please call the Florida Keys Council of the Arts for suggestions and assistance.

Phone: 295-4369

Fax: 295-4372

E-mail: [info@keysarts.com](mailto:info@keysarts.com)

Web site: [www.keysarts.com](http://www.keysarts.com)

## Special Project Application - Part 1

Project title \_\_\_\_\_

Amount requested \_\_\_\_\_

This is our first application to FKCA \_\_\_\_\_ Yes \_\_\_\_\_ No  
If no, the previous application(s) \_\_\_\_\_ was funded \_\_\_\_\_ was not funded;  
was submitted \_\_\_\_\_ as an individual \_\_\_\_\_ as part of a group  
by whom? \_\_\_\_\_

We have received FKCA funding \_\_\_\_\_ times

Applicant is:

\_\_\_\_\_ Individual artist (attach resume and proof of Monroe County residency)

\_\_\_\_\_ Nonprofit arts organization (attach IRS 501(c)(3) letter)

\_\_\_\_\_ Ad hoc/unincorporated arts organization (attach mission statement)

Name of artist/organization \_\_\_\_\_

Contact person \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ Web site \_\_\_\_\_

### Description of project (Please attach)

**Need** (Why are you seeking funding?)

**Goal** (What will you do?)

**Methods** (How will you do it?)

**Use of funds** (How will you spend the grant money?)

**Future support anticipated from other sources**

**Results** (What difference will you make in your world?)

**Evaluation** (How will you measure the success of the project)

## Special Project Application Part 2

BUDGET	A. EXPENSES	B. INCOME	C. INCOME
		This grant	Other funds
Artistic fees			
Supplies & materials			
Other			
Project totals			

If total project budget exceeds grant amount requested, please describe other funding sources, including any in-kind contributions. You may add more detail as appropriate. The total in column A should equal the total of columns B+C.

If awarded a lesser amount than requested, can you still complete the project?  
If so, what adjustments will you need to make?

*By our signatures we verify that all information in this application is correct. We are attaching (1) a description of the project; (2) proof of nonprofit status, or mission statement, or artist resume and proof of residency in Monroe County.*

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Artist or head of organization Type or print name Date

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Contact person, if different Type or print name Date