

# ArtReach

*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.

ArtReach is an audience development grant for individual Monroe County artists and arts organizations and their partners.

The name "ArtReach" is a pun on the word "outreach."

The project must extend the applicant's typical audience by reaching out to a new population.

Grant projects may be in any genre: performance, visual art, or writing.

The applicant must have a partner organization. This partner need not be an arts organization. The partner contributes something of value to assist the artist or cultural organization to reach out to a new audience.

Awards range up to \$1,000 per project.

***Annual deadline: June 30***

# ArtReach

## Application Procedures

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

ArtReach  
Florida Keys Council of the Arts  
1100 Simonton St.  
Key West, FL 33040

*The application must be postmarked or hand delivered by June 30*

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

**A letter of support from the partner describing how the partner will be involved in the project is required.**

Successful applicants will be notified in about six weeks.

The project must be completed by the following June 1.

The grantee will receive monies on a reimbursement basis, upon completion of 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)

**ArtReach**  
**Application - Part 1**

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

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

This is our first application to ArtReach \_\_\_\_\_ 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 ArtReach 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 \_\_\_\_\_

Partner organization \_\_\_\_\_

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

Address \_\_\_\_\_

\_\_\_\_\_

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

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

**Description of project (Please attach)**

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

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

**Outreach** (Whom will you serve? Describe in detail the new audience to be reached. How is it new for you?)

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

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## Application Part 2

### Budget

	Total	This FKCA grant	Other funds, if any
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.

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, including the goal, methods, outreach population, and evaluation; (2) a support letter from our partner; and (3) 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