

# East Hampton Arts & Culture 2016 Grant Application

**DEADLINE: FRIDAY, MARCH 4, 2016 AT 4:00PM**

The East Hampton Arts & Culture Commission welcomes grant applications from East Hampton organizations and individuals with programs and/or projects that enrich the lives of East Hampton residents through the arts.

## **ELIGIBILITY:**

One of two \$500 mini-grants are available to be awarded to individuals or organizations residing in East Hampton, Connecticut. The commission reserves the right to award a grant to an individual or organization it determines will have the most potential impact of arts and/or culture on the town.

## **CRITERIA FOR AWARDING GRANTS:**

- The artistic and organizational quality of the organization and/or project and its likelihood of continuing viability or success
- The organization's or project's accessibility and service to the East Hampton community
- Grant recipients must credit the East Hampton Arts and Culture Commission on all press releases, posters, print advertising and programs.

## **EVALUATION**

An interview may be requested of the candidate prior to awarding the grant. An update of your progress will be required six months post-award date and a final report will be required one year post award date.

## **APPLICATION FORM INSTRUCTIONS:**

The Grant Application is available in PDF format. A printed copy must be created for submission. Make sure to keep a copy of the application.

For questions call:

*860-267-1135*

Please submit your application to:

East Hampton Arts & Culture Commission

Town Hall

20 East High St.

East Hampton, CT 06424

*arts@easthamptonct.org*

Our mission is to foster, promote, encourage and celebrate  
the excellence, enjoyment, and abundance of arts and culture in our town.

easthamptonct.gov

# 2016 Grant Application



## East Hampton Arts & Culture

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East Hampton Arts &  
Culture Commission  
Town Hall  
20 East High St.  
East Hampton, CT 06424  
[arts@easthamptonct.org](mailto:arts@easthamptonct.org)

**Instructions:** Complete all questions; review instructions document for full details before completing. Application must be submitted to address above.

|                       |                 |                                     |       |
|-----------------------|-----------------|-------------------------------------|-------|
| NAME/ ORGANIZATION    |                 | ORGANIZATION'S EIN# (IF APPLICABLE) |       |
| ADDRESS               |                 | EMAIL                               |       |
| TOWN, STATE, ZIP CODE |                 |                                     | PHONE |
| PROJECT COST ESTIMATE | COMPLETION DATE |                                     |       |
| PROJECT NAME          |                 |                                     |       |

Are you a resident of East Hampton?  yes  no

Are you a 501(c)3 Organization?  yes  no

Are you seeking other funding?  yes  no

### Purpose

Briefly state the needs or issues to be addressed with this project/program. (100 words or less per section)

### Goals & Objectives

Briefly describe the objectives, how the goals will be achieved, and timeline.

### Assessment

How will you know if the project/program is successful?

### Awareness

Please describe the manner in which you plan to promote/publicize your project and credit EHA&C for funding support.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_