

2018-2019 CULTURAL ARTS GRANT PROGRAM
ATTACHMENT 2 – ORGANIZATION GRANT APPLICATION

The operating funds application should consist of the following elements:

1. Application cover sheet
2. Proof Liability Insurance
3. Organization's Mission & Vision Statement.
*Relation to Cultural Arts Commission's Mission and Vision
4. Narrative including the following six areas [Max: 1500 words]
 - A. Description of the organization's history, philosophy, goals and achievements.
 - B. Describe ongoing arts education programs and activities,
 - C. What makes your programs unique from other similar organizations in the area?
 - D. Description and explanation of the proposed use of funds.
 - E. Fill out Grantee Program Plan attachment #1 stating objectives, activities, assessment technique, and intended measurable outcomes.
 - F. Describe organizational administrative and governance structure (number of staff and volunteers).
 - *Capacity building, strategic planning processes and activities, and long-range plans
 - G. Describe organizational fiscal capacity:
 - *Describe changes to operating budget your capacity building and planning
 - H. Community Impact
 - I. Evaluation:
 - Describe your marketing and audience development strategies, including attendance figures.
 - Describe your programs growth and development over time?
 - How has your program benefited from the cultural arts grant funds?
 - **Refer to Attachment # 2: Proposal Budget Form (pg 2-)
 - How did you measure and evaluate your organizations success in regards to growth, outreach , marketing goals and impact on program participants and community,
 - **Refer to Attachment #1: Grantee Plan Form (pg 2-)
 - 4. Fully completed application forms and all required supporting material identified herein. To include:
 - Organizational Baseline Data Questionnaire (pg 2-6)
 - Proof of Non-Profit (Organization 501(c)-3 Status *If required MOU letter of Fiscal Receiver with Non-Profit Status)
 - Organizational Financial Information Summary (pg 2-4A)
 - Organization's Proposed Budget Plan (pg 2-4B)
 - Signature page (pg 2-7)
5. Any supplemental materials the organization feels would provide additional information for consideration by the Grant Review Committee. (pg 2-3)

SUPPLEMENTAL MATERIAL (OPTIONAL). *Letters of Support (2 max)

***List of Non-profit organization's Board of Directors, Staff and affiliations.**

***Organization's Fiscal Year Audit Report.**

Check List of Grant Proposal

Organization Name _____

Application Check List

1.	Application Cover Letter
2.	Proof of liability Insurance
3.	Organizations Mission & Vision Statement
	*Relationship to CAC Mission & Vision Statement
4.	Project Narrative Statement
	*Attachment #1 Grantee Program Plan (pg 2-)
	*Attachment #2 Project Timeline (pg 2-)
5.	Baseline Data Questionnaire (pg 2-5)
6.	Proof of Non-Profit (Organization 501(c)-3) Status
	*If required MOU Letter of Fiscal Receiver with Non-profit Status)
7.	Organization's Financial Information (pg 2-4a
8.	Organization's Proposed Budget (pg 2-4b)
9.	Signature Page (pg 2-6)
10.	One original collated hard copy of application.
	*Three hole punch copy.
11.	Two collated hard copies of application.
	*Three hole punch copies.
12.	Description (list) of Work Samples;
	submit one set of each sample.
	*Insure you keep a backup set for yourselves.
13.	SUPPLEMENTAL MATERIAL (OPTIONAL)
	*List of Non-profit organization's Board of Directors, Staff and affiliations.
	*Organization's Fiscal Year Audit Report.
	*Letters of support (2 max.

Description of Audio-Visual Work Samples



Application

_____ DVD(s). _____ CD(s).

_____ FLASH DRIVE(s). _____ OTHER

Attach the list and descriptions of the the audio-visual work samples submitted
Refer to (Page 2-5)

*Audio-Visual work samples must be submitted, using the following PC-based programs and file types for review:

Windows Photo Viewer: .jpg, .bmp, .jpeg, .png, .gif, .tif

Microsoft Office: .doc, .docx, .ppt, .pptx, .xls, .xlsx, .htm, .html

Windows Media Player: .asf, .wma, .wmv, .wm, .mpg, .mpeg, .mlv, .mp2, .mp3, .mpa, .mpe, .m3u, .wav, .mov, .m4a, .mp4, .mp4v, .3g2, .3gp2, .3gp, .3gpp, .av1

Description of Audio-Visual Work Samples



Organization Name: _____

Title of Project: _____

List of Work Samples submitted:

Name	Title	date	media	length (where applicable)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

ORGANIZATION'S FINANCIAL INFORMATION SUMMARY



Organization Name; _____

Title of Project: _____

Please provide the following financial information reported in the organization's most recent audited financial statement, 990 or signed financial statement submitted with this proposal.

Report for Fiscal Year Ending: _____

ORGANIZATIONAL INCOME

Program Income	Service Fees, Charges, Tuition	\$
Government Sources		
	Grants	\$
	Contracts/Fee for Service	\$
Contributions		
	Individuals	\$
	Corporate/Business	\$
	Foundations	\$
	Other	\$
TOTAL		\$

ORGANIZATIONAL EXPENSES

Program Services		\$
Fundraising & Financial Development Costs		\$
Administrative & General Costs		\$
TOTAL OPERATING		\$

If expenses exceeded income for the year, how has the deficit been financed?
(Attach page with explanation of deficit financing)

**City of Oxnard
Cultural Arts Commission
2018 Cultural Arts Grant Program
ORGANIZATION'S PROPOSED BUDGET**

Organization Name: _____

Project Name: _____

PLEASE LIST TOTAL PROJECT COSTS AND DELINEATE WHICH COSTS ARE BEING PROPOSED FOR CAG FUNDING

STAFFING (List by position; include salary and benefit costs; and asterisk any new position(s) for the project):

<u>Position</u>	<u>Hours/Salary/Benefits</u>	<u>TOTAL Cost</u>	<u>CAG Funding</u>

EQUIPMENT/SUPPLIES (List and explain)

OTHER COSTS (List and Explain)

PROJECT BUDGET TOTAL

*Please provide a budget narrative detailing only the items that are not self-explanatory in their relationship to the program.

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OTHER FUNDING (List amount and source of funding pending or expected to be received from other sources):

Type (grants, contracts, etc.)	Source	Status	Amount
Grants	State & Local		
Donors/Contributions/Service			
Grant request	Corporate/Philanthropy		

PERCENTAGE OF TOTAL PROJECT COST BEING REQUESTED FROM CAG \$ _____ / \$ _____ = _____ %

BASELINE DATA QUESTIONNAIRE

Please complete this questionnaire and submit it with your grant application. Please note that the information on this form will be treated confidentially and will only be used for evaluation of the funding outcomes. It will also be pooled, with anonymity preserved, with other data to give a picture of the arts organizations funded by the City.

Organization

Organization Name: _____

Date organization began operation? _____

Number of paid staff? Full-time _____ Part-time _____

Number of volunteers? _____ Total # of volunteer hours annually? _____

What is your organization's annual operating budget? _____

About how many public events (i.e., art showings, open houses, performances, etc.) do you offer per year?

About how many people do you reach/serve per year? _____

Board

Total number of board members? _____

Number of board members who contribute financially to your organization? _____

Total annual contribution from board members? _____

Are your board members active in fundraising? Yes No

Budget

What percentage of your annual expenses is spent on the following:

capacity building or strategic planning activities: _____

administration _____; fundraising _____; operations _____

SIGNATURE PAGE

By signing below, we attest that the information included in this application is accurate.

If awarded a grant, the organization's Board of Directors and management agree to the following:

1. Abide by the grant report requirements.
2. Provide required reports to the City of Oxnard Cultural Arts Commission.

Print Organization Name

Signature, Executive Committee Member, Board of Directors

Date

Print Name and Title

Signature, Executive Director

Date

Print Name and Title

**2018-2019 City of Oxnard Cultural Arts Grants
Organization Grant Evaluation Sheet
(Legacy and Emerging Arts Organizations)**

Organization Name: _____

Criteria (see page 2-1, Attachment 2)

1. Artistic Excellence/Merit

Describe in detail the organization's programs and activities, including artistic goals, philosophy, mission. What distinguished this organization's programs? Does this organization offer consistent opportunities to expose the community to its artistic resources?

	Rating	Score (rating x 5)
Rating of 5 or 4: Clear details are shown of organization's activities and artistic goals. Proposal demonstrates strong ability to focus and present concept/ philosophy/ mission for programming; proposal includes visual attachments. History of completed programming describes mission/ concept/philosophy; these descriptions permeate proposal, and clearly describe innovative and progressive programming for the Oxnard community.		
Rating of 3 or 2: The organization's programming is adequately described. Mission, concept and philosophy are not clearly presented. Examples given of concept, either in writing or visually, show minimal plan for sharing with the community or integrating resources with the community.		
Rating of 1: Organization's programs and activities are not presented cohesively and lack links to community. Proposal does not outline a cohesive concept/ philosophy and/or specific mission; proposal is non- focused.		

2. Community Impact and Cultural Diversity

Are marketing and audience development strategies and efforts at audience outreach explained? Are numbers on attendance figures and community involvement and response of participants documented? How have programs grown or changed over time? What evaluation tools are used to measure success?

	Rating	Score (rating x 3)
Rating of 5 or 4: The organization clearly addresses a need which will meaningfully impact the Oxnard community; the organization's goals and mission are compatible with the Cultural Arts Mission of integrating arts into the fabric of the community. In addition, the organization introduces the community to artistic resources and respects the diversity of the community. Proposal shows that the organization will clearly build and sustain the arts among differing members of the community. The organization demonstrates in writing and/or visual media, consistent program delivery and effectiveness.		
Rating of 3 or 2: The organization's role in building community diversity is adequately understood. The organization's definition of diversity is appropriate and meets the requirement. The community impact plan and history is not fully or clearly articulated. Ability to coordinate community integration of the arts into the community life and to respect diversity in programming is not clear.		
Rating of 1: The organization's role in building and sustaining community impact is unclear, non- specific and non- focused.		

**2018-2019 City of Oxnard Cultural Arts Grants
Organization Grant Evaluation Sheet
(Legacy and Emerging Arts Organizations)**

3. Evaluation

Is there demonstrated effort to build and sustain cultural diversity of audience, board and staff through outreach, including use of social media, print media, etc. using different languages and different cultural media outlets? How does the organization define diversity?

Rating of 5 or 4: Proposed time frames and accountability measures are clearly presented. Evidence is shown of tools to assess continued successful operation, including self- defined measures of excellence and meeting or exceeding specific measurable goals. (Examples: pre- and post-goals and achievements, attendance, audience outreach, Facebook Likes etc.) History of organization's growth and successful programming is clearly presented and understandable.	Rating	Score (rating x 2)
Rating of 3 or 2: Evidence of tools for operating plans are presented. Time frames, accountability and other details are minimal. The tools for organizing and evaluation or measurement of effectiveness are not clearly detailed.		
Rating of 1: Objectives, assessment and operational framework are not realistic or detailed.		

4. Organizational and Fiscal Capacity

Is administrative and governance structure (Board of Directors, staff, volunteers) explained? Is operating budget provided, including any changes? Are Board meetings/workshops/retreats held regularly? Is there a fund-raising strategy and indication that other grants have been sought, verified by historical documentation or Letters of Support? Is evidence presented in writing (via documents or charts) to verify stability and ability to complete proposed programming?

Rating of 5 or 4: The funding request is thorough and appropriate to complete the identified mission; request clearly outlines the manner and methods to utilize the funds. Plans for additional fiscal support for operating are provided. Stability for continued operation is demonstrated. Focus and skill to insure fiscal supervision and effectively manage expenses is evident. Governance structure demonstrates strategic planning and clear responsibility for tracking and guaranteeing operation.	Rating	Score (rating x 1)
Rating of 3 or 2: Budget is not clearly detailed or clearly presented. Clarification of expenses and planning is incomplete. A governance structure is unclear; limited evidence of retreats, strategic planning, and fiscal oversight do not clearly demonstrate stability.		
Rating of 1: Evidence of fiscal management is missing and/or unclear.		
Total Score		

CITY OF OXNARD
CULTURAL ARTS COMMISSION
2018-2019 GRANTEE PROGRAM PLAN



Organization:	Project Title:
Program Goal:	

OBJECTIVES	ACTIVITIES	ASSESSMENT TECHNIQUES (List the tools used to measure change)	MEASURABLE OUTCOME/ EVIDENCE OF CHANGE (List the expected evidence of change in quantitative or qualitative terms)

CITY OF OXNARD
CULTURAL ARTS COMMISSION
2018-2019 GRANTEE TIME-LINE



Organization: _____

Project Title: _____

PROJECT TIMELINE			
Date	Description of Activity	Outreach: Number of People reached.	Evaluation

