CITY OF OXNARD
ART IN PUBLIC PLACES (AIPP) GRANT PROGRAM
Fiscal Year 2019-2020

PROJECT GRANTS APPLICATION

Due Tuesday, November 26, 2019 by 4:00 p.m.

✓ Submit 5 Copies of application
✓ Submit an application for funding in person to:
  Oxnard Cultural & Community Services
  Recreation Division - Cultural Arts Office
  305 West Third Street, West Wing-1st Floor
  Oxnard CA 93030

Contact:
Julie Estrada
Recreation Coordinador/Cultural Arts
(805) 385-7997
julie.estrada@oxnard.org
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AIPP GRANT PROGRAMS: PROJECT GRANTS
PROPOSED PROJECT INFORMATION

Full Name of Artist or Collaboration: ______________________________

Mailing Address: ________________________________________________

City, State, ZIP Code: ____________________________________________

Primary Contact (if collaborative): _________________________________

Telephone: ( ) __________________________ Fax: ( ) __________________

E-mail Address: __________________________ Federal Tax ID: ____________

If Collaborative organization – do not submit SSN

1. Name of proposed project: ______________________________________

2. Street Address of proposed project: _______________________________

3. Amount of funds requested from the City of Oxnard: $ ____________
   (Enter total amount)

4. Type of Program:
   Please check the box next to one or more categories which the proposed program serves:
   □ Craft          □ Dance            □ Design Arts
   □ Interdisciplinary Arts □ Literature    □ Music
   □ Opera/Musical Theater □ Philosophy    □ Theater
   □ Film/Video       □ Small Press Publishing □ Folk Arts
   □ Media Arts       □ Visual Arts       □ Other___________

5. Mandatory pre-application workshop: Date Attended: ________________

6. Is this a previously funded program? Yes_________ No_________
   If yes, please include a copy of your final report with your attachments.

Project Description for publication (1-2 sentences):

________________________________________________________________________

________________________________________________________________________
APPLICATION CHECKLIST

Please make sure all required elements are included in your application/proposal. Applications that are incomplete will be disqualified from judging.

APPLICATION:
☐ Proposed Program Information
☐ Checklist

PART A: PROJECT PROPOSAL
☐ Artist Statement
☐ Resume
☐ Proposed Project Description
☐ Project Evaluation/Outcomes
☐ Impact Statement
☐ Collaboration (if applicable)

PART B: BUDGET
☐ Budget Information Worksheet
☐ Budget Description

PART C: ATTACHMENTS (only one copy of each)
☐ Copy of recent W-9
☐ Copy of board authorization to apply for this grant
☐ Business License and any required certification related to the program
☐ Business Insurance will be required prior to execution of a contract
☐ Works Submitted worksheet
☐ Program Plan – Outline Worksheet
☐ Program Plan - Timeline Worksheet

CERTIFICATION OF APPLICATION
☐ Complete your organizations portion, you will receive a signed copy for your records at the submission of your application.
PART A: PROGRAM PROPOSAL

In an attached report please address the following: You may use any format you wish as long as the following items serve as a headline and are clearly defined.

1. Artist Statement
   a. Describe your artistic goals and the nature of your work

2. Resume
   a. Include a detailed resume outlining your education, fellowships or awards received and art related work history.

3. Proposed Project Description:
   a. What is it that you plan to do? Provide the title, description, and explanation of the proposed project. This should be a detailed write-up of the information applicant provides in the attached program plan worksheet.

4. Project Evaluation/Outcomes:
   a. Include an evaluation component, that is, how and when might you know if you achieved your goals? This should be a detailed write-up of the information applicant provides in the attached project timeline worksheet.

5. Impact Statement:
   a. What impact will this grant have on you at this particular point in your career?
   b. The grant seeks to develop and encourage those whose works influenced or are influencing what art is in Oxnard. How do you see your art contributing to or helping to define art in Oxnard? How are you connecting to the broader Oxnard arts community?
   c. What is the impact on the individuals (participants and audience), for example their aesthetic growth, elevated appreciation for the arts, etc.?

6. Collaboration:
   a. Will you collaborate with other partners in implementing the proposed project?
      i. If so, please identify the collaborative partners and describe how the proposed project will be designed and implemented.
   b. How will funding be distributed to each collaborative partner and what percentage of the requested AIPP funding will be provided to each partner?
**PART B.**

**BUDGET INFORMATION**

The following budget form pertains only to the specific program or activity that is proposed to be funded with AIPP funds. Please attach a budget description describing costs such as materials, equipment, travel, etc.

<table>
<thead>
<tr>
<th>Name:</th>
<th>Program:</th>
<th>Total Prior Year’s Budget for Project (if multi-year) Column A</th>
<th>Total Annual Budget for Proposed Project Column B</th>
<th>AIPP Portion of Budget for Proposed Project Column C</th>
</tr>
</thead>
</table>

**Revenue:**
1. AIPP Grant/City of Oxnard
2. Grants from other Gov’t Agencies (not City of Oxnard)
3. Contributions
4. Membership Dues
5. Program Service Fees
6. Other Revenue (Specify)
7. **TOTAL REVENUE**

**Expenses:**
8. Direct Assistance to Individuals
9. Salaries, Employee Benefits, Payroll Taxes
10. Professional Fees
11. Supplies
12. Telephone
13. Postage & Shipping
14. Rent/Lease
15. Rental & Maintenance of Equipment
16. Printing & Publications
17. Travel
18. Other (Specify)
19. **TOTAL EXPENSES**

**Note:** Figure in AIPP Grant/City of Oxnard (Line 1), Column C, and TOTAL REVENUE (Line 7), Column C, must equal the amount of funds requested on the cover sheet, #3. Figure in TOTAL REVENUE (Line 7), Column B, must equal TOTAL EXPENSES (Line 19), Column B. Figure in Line 7, Column C, must equal line 19, Column C.
Please type Name of Organization

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PART C.
APPLICATION ATTACHMENTS

1. Required Attachments:

*Please separate attachments from the rest of the application. Provide only ONE (1) copy of the documents below that apply to your agency:*

- ☐ Copy of recent W-9
- ☐ Business License and any required certification related to the program
- ☐ Business Insurance will be required prior to execution of a contract
- ☐ Works Submitted worksheet (attached)
- ☐ Project Plan - Outline Worksheet (Attached)
- ☐ Project Plan - Timeline Worksheet (Attached)
AIPP GRANT PROGRAMS: PROJECT GRANTS
WORKS SUBMITTED

Artist/Collaborative Name: ______________________________________________________

Title of Program/Project: ______________________________________________________

Summary:

_____DVD(s) Qty._______  _____CD(s) Qty._______

_____Flash Drive(s) Qty._______  _____Other Qty._______

Describe: ____________________________

Please complete the list and descriptions of the audio-visual work samples submitted below for all files.

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

  Windows Photo Viewer:  .jpeg, .bmp, .jpg, .png, .tif
  Microsoft Office:  .doc, .docx, .ppt, .xls, .xlsx, .htm, .html
  Windows Media Player:  .asf, .wma, .wmv, .wm, .mpg, .mpeg, .mlv, .mp2, .mp3, .mpa, .mpe, .m3u, .wav, .mov, .m4a, .mp4v, .3g2, .3gp2, .3gp, .3gpp, .av1

1. File Name: ___________________  Project Title: ___________________
   Date:_______________________  Media:_______________________  Length:__________

2. File Name: ___________________  Project Title: ___________________
   Date:_______________________  Media:_______________________  Length:__________

3. File Name: ___________________  Project Title: ___________________
   Date:_______________________  Media:_______________________  Length:__________

4. File Name: ___________________  Project Title: ___________________
   Date:_______________________  Media:_______________________  Length:__________

5. File Name: ___________________  Project Title: ___________________
   Date:_______________________  Media:_______________________  Length:__________

6. File Name: ___________________  Project Title: ___________________
   Date:_______________________  Media:_______________________  Length:__________
**AIPP GRANT PROGRAMS: OPERATING GRANTS**
**PROJECT PLAN - OUTLINE**

Artists/Collaborative Name: 

Title of Program/Project: 

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>ACTIVITIES</th>
<th>ASSESSMENT TECHNIQUES (List the tools used to measure change)</th>
<th>MEASUREABLE OUTCOME/EVIDENCE OF CHANGE (List the expected evidence of change in quantitative or qualitative terms)</th>
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AIPP GRANT PROGRAMS: PROJECT GRANTS
PROGRAM PLAN - TIMELINE

Artist/Collaborative Name: ____________________________________________

Title of Program/Project: ____________________________________________

<table>
<thead>
<tr>
<th>DATE</th>
<th>DESCRIPTION OF ACTIVITY/TARGET</th>
<th>OUTREACH: Number of People Impacted/Reached</th>
<th>EVALUATION</th>
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PART D.
CERTIFICATION OF APPLICATION

Do not attach this form to your application. Submit only one copy of this form, a copy will be provided to the applicant

The undersigned applicant hereby certifies that:

The information in this application is true and accurate to the best of my ability and knowledge;

City staff may call or visit my current or proposed place of business or proposed project site at any time during the funding process to verify the information presented in this application;

The agency shall comply with City policies and requirements applicable to the Arts in Public Places Grant Program (AIPP);

The assistance made available through the AIPP grant program is not being used to increase the support (financial or in-kind) currently provided by the City of Oxnard.

The agency understands that the awarded amount may be different from the requested amount; and

Sufficient funds will be available to complete the project if the agency accepts the AIPP awarded amount.

__________________________________________   ____________________________
Date of Application                        Signature of Applicant Representative

__________________________________________
Title

__________________________________________
Name of Agency (if applicable)

DO NOT WRITE OR TYPE BELOW THIS LINE

__________________________________________   ____________________________
Date of Receipt                        City Staff

FY 2019-20 AIPP Project Funds Application
## 2019-2020 Arts in Public Places (AIPP) Evaluation Rubric

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Missing</th>
<th>Weak / Unsatisfactory</th>
<th>Below Average / Minimal</th>
<th>Average</th>
<th>Above Average</th>
<th>Excellent / Strong</th>
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<tbody>
<tr>
<td>Evaluation Score</td>
<td>0 pts</td>
<td>1 pt.</td>
<td>2 pts</td>
<td>3 pts</td>
<td>4 pts</td>
<td>5 pts</td>
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<td><strong>COMPLETION</strong></td>
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<td>The proposed project has objectives that are timely and achievable, including an assessment component to measure the project’s success.</td>
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<td>Application is complete and includes all required elements for grant</td>
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<td>Application projects are consistent with the mission and vision of the City of Oxnard Cultural Arts Commission.</td>
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<td><strong>SUSTAINABILITY</strong></td>
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<td>The project funding request is thorough and well considered.</td>
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<td>Project budget is complete and demonstrates a sustainable program model.</td>
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<td><strong>ARTISTIC EXCELLENCE AND MERIT</strong></td>
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<td>The applicant is a resident of Oxnard, is prepared and qualified to take on the project, and has a record of work.</td>
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<td>Applicants show professional competence in an artistic discipline</td>
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<td>Previous artistic achievement exhibitions, performances, publications, or other notable activities are included in the application</td>
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<td>Project is unique</td>
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<td><strong>COMMUNITY IMPACT</strong></td>
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<td>The need for the project is clearly described by the applicant as addressing a valuable need in the community that will have a meaningful impact, including serving diverse groups.</td>
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<td>Project supports and promotes the Arts in Oxnard through programming, resources, and opportunities for Oxnard Residents.</td>
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<td>The project addresses the goal of building arts in Oxnard.</td>
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**TOTAL SCORE** 0