



Essex County Arts Council (ECAC) Artist Career Development Grant Application Form

Please provide the required information below, identifying responses to the specific items by their stated number.

1. Artist name
2. Mailing address
3. Are you currently a resident of Essex County, NY? Yes No
4. Phone
5. Email
6. Website
7. Title of Project/Opportunity
8. Date(s) of Project/Opportunity
9. Is this an opportunity to which you have been invited? Yes No
10. Narrative (please attach **two pages maximum**):
 - a. Briefly describe your project or opportunity;
 - b. Briefly describe your artistic discipline;
 - c. Describe, in detail, your artistic project or opportunity;
 - d. What are the grant funds needed for?
 - e. Describe how this opportunity or project will have a significant impact on your artistic career.

11. Budget: Note that a clear description of each expense is required. You can list all of your project expenses even if they total more than the grant can fund.

PROJECT EXPENSES	Description and Provide Breakdown	Amount
	TOTAL	
PROJECT INCOME		
	TOTAL	
PROJECT REQUEST		

12. If your budget deficit exceeds the amount this grant can fund (or if you receive funding at a lower amount), how will you make up the difference (or decrease costs)?

13. Your signature certifies that the narrative, budget and supporting documentation are accurate and true. (If e-mailing as attachment, typing your name serves as your signature. The above sentence must appear with your signature.)

Applicant Signature _____