The Community Arts Access (CAA) program grants, known in the past as “Arts Development” or "regranting" awards, fund public arts programming and audience development projects of community arts organizations and local not-for-profit organizations with arts-related programming.

This program is funded by the Illinois Arts Council Agency’s CAA grant and matching grant money from the Springfield Area Arts Council through the City Arts grant from the City of Springfield.

Grants from this program are available to organizations in Sangamon and Menard counties. The Springfield Area Arts Council does not limit its Community Arts Access program to member organizations. Program grants provide partial support to not-for-profit arts organizations or community organizations with arts programming for:

- New projects
- Ongoing arts programming (may be a single event, season, festival)
- Artistic and/or professional personnel
- Promotional and audience development projects

Funds are available for activities occurring between September 1, 2015, and July 31, 2016.

An applicant organization must be registered as a not-for-profit organization with the Office of the Illinois Secretary of State. An organization must have been in active service to the public for at least one year prior to date of application for Community Arts Access funding.

NOTES:

- All applicants must attend a workshop to be considered for grant funding in FY16. These will be held at the Hoogland Center for the Arts (420 South Sixth Street) on July 1 at 5:30pm, July 6 at 6:30pm, July 8 at 10:00am, and July 18 at 9:00am.
- The Community Arts Access grant request is not to exceed $750.
- Applicants may receive less than the requested or the maximum amount.
- Applying for a Community Arts Access grant does not guarantee receipt of funding.

APPLICATION DEADLINE:
Postmarked no later than Friday, July 31, 2015, OR hand-delivered to the SAAC Office by 5:00pm, July 31, 2015.

HOW TO APPLY FOR A COMMUNITY ARTS ACCESS GRANT

1. Attend a Community Arts Access Grant Application Workshop.
2. Complete the Application Form.
3. Complete the Narrative Form. Using no more than three pages, clearly describe your project and your organization’s history, answering the questions listed on Narrative page. For organizations which are not solely arts organizations, information should relate primarily to arts programming and activities.
4. Complete the Project Budget Form. This is not the Operating Budget of the organization.
5. Reproduce ten (10) sets of the original application, narrative, and project budget forms.
6. The following items should be included only with the “original signature set,” not with each copy of the application.

- One set of up to three (3) pieces crediting the Springfield Area Arts Council and the Illinois Arts Council Agency for previous CAA projects. (A copy of a webpage may be submitted as “credit” evidence.)

- If a first-time applicant, then include a single page stating “First Time Applicant.”

- ONE COPY of each of the following as attachments:
  - Last completed Operating Budget (FY14 or FY15)
    [This is not the project budget.]
  - Current or Proposed Operating Budget (FY15 or FY16)
  - List of current Board of Directors, with mailing addresses
  - Organization's current year's proof of Illinois not-for-profit status
    This is neither the IRS 501(c)(3) Tax Exempt Form nor the Attorney General's 990 Form.
    A copy of one of the following will qualify:
    - annual report to Secretary of State.
    - canceled check to Secretary of State.

Please use paper clips or binder clips. Do not put in folders or notebooks. Do not staple.

Submit to the Springfield Area Arts Council the “original signature” set with attachments listed above PLUS ten (10) copies of the Application, Narrative, and Project Budget.

NO APPLICATIONS ARE ACCEPTED AFTER THE DEADLINE: JULY 31, 2015.
EVALUATION CRITERIA

A Community Arts Access panel of seven artists and community members plus a panel chairperson from the Springfield Area Arts Council’s Board of Directors will review all applications and make funding recommendations to the SAAC Board. The Board of Directors will ratify the recommendations, and organizations will be notified of the grant award decision (pending funding by the Illinois Arts Council Agency) by September 18.

The following points will be considered when reviewing applications:
- If organization received prior funding, then did they adhere to the agreement regarding acknowledgment of the Springfield Area Arts Council and the Illinois Arts Council Agency in their publicity?
- Evidence of cash support for the project equal to or greater than 25% of the requested grant amount
- Evidence of in-kind support for the project equal to or greater than 10% of the requested grant amount
- Number of people directly affected by this project
- Opportunities for Illinois artists in the project
- Is the project unique or innovative?
- Does the project develop new audiences for the arts?
- Does the project promote / preserve the diverse art forms of ethnic groups?
- Are special or underserved populations affected by this project?
- How does the organization’s collaboration / partnership with another entity enhance the project?
- Who is the target audience?
- What is the need in the community for the proposed project?
- What financial resources does the organization offer to support this project?
- What would be the effect on the project if it receives little or no grant funding?

COMMUNITY ARTS ACCESS grants from the SAAC do not fund
- Individuals
- Cash awards, trophies, etc.
- Capital expenditures, permanent equipment, out-of-state touring, scholarships, deficit funding
- Fund-raisers, benefits, receptions, social functions
- Projects taking place outside Menard and/or Sangamon counties in Illinois
REVIEW PROCESS

1. A Springfield Area Arts Council staff person reviews the application for eligibility and completeness. Acknowledgment of an eligible application is given after the grant deadline has passed and will include a grant number to be used in future correspondence. An organization whose application is ineligible or incomplete will receive immediate notification.

2. Community Arts Access panelists meet regarding panel review process. Copies of the applications are given to panelists for individual review. Attachments submitted with the application are made available for review by panelists.

3. The Community Arts Access panel will meet in August to review applications. Applicants may be asked for further information if a question regarding the application is raised.

4. The panel recommends the amount of funding for applicant organizations (based on the amount of the Community Arts Access grant from the Illinois Arts Council Agency plus the funding match from the Springfield Area Arts Council).

5. The SAAC Board of Directors will review the panel's recommendations and ratify the FY16 grant awards. Applicant organizations can expect to be notified of their grant status by September 18, 2015.

6. The Letter of Notification will include a “Grant Agreement” and a “Cash Request” which must be completed and returned to the SAAC. After funds are received from the Illinois Arts Council Agency, half of the grant award will be presented to an organization approximately thirty days prior to the starting date of its project/program. The final portion of the grant award will be presented to an organization after receipt of the Final Report.

7. The Final Report is due within thirty (30) days of the completion of the program. Failure to submit a final report will result in the organization’s not receiving the remaining portion of its grant funding. It also will jeopardize the receipt of future Community Arts Access funding.

APPLICATION DEADLINE

Friday, July 31, 2015

Hand-delivered by 5:00pm on Friday, July 31, to the Springfield Area Arts Council office on the lower level of the Hoogland Center for the Arts at 420 South Sixth Street, Springfield OR

Postmarked by Friday, July 31, and sent to Springfield Area Arts Council
420 South Sixth Street, Springfield, IL 62701
Springfield Area Arts Council

COMMUNITY ARTS ACCESS  FY16  APPLICATION

ALL APPLICANTS FOR FY16 (2015-2016) MUST ATTEND AN APPLICATION WORKSHOP TO BE ELIGIBLE FOR FUNDING.

Please review guidelines for this application. Do not put applications in folders or binders. If you need additional assistance in completing application, then contact the Springfield Area Arts Council (753-3519 or programs@springfieldartsco.org).

Check here if applying to the Springfield Area Arts Council for a Community Arts Access Grant for the first time or after a two-year period.

Name of Applicant Organization (Use organization's legal name.)
Year Founded
Year Incorporated
Fiscal Year Ending Date
Address of Organization (Street or Post Office Box)
City
State
Zip Code
Phone Number
E-mail Address

Official to whom notification should be sent
Title

Project Director's Name
Phone Number
E-mail Address

Project Director's Address (Street or Post Office Box)
City
State
Zip Code

County
IL House #
IL Senate #
US Congressional District #

GEOGRAPHIC AREA to be served (must be defined by county, city, town, village, or township)

I. Estimated number of adults to benefit from this project
II. Estimated number of youth (high school age and younger) to benefit from this project
III. Estimated number of artists providing services specifically identified with this project
IV. [Only arts organizations are to answer IV.]
Estimated number of individuals benefiting from applicant's total public arts programming

Did you receive support from Illinois Arts Council Agency (IACA) for FY16?  Yes  No
Did you apply for IACA support in FY16?  Yes  No
Is the applicant organization requesting funds from the IACA or another re-granting agency for this same project?  Yes  No
If yes, which agencies?

SUMMARY OF PROJECT BUDGET

A. Community Arts Access Grant Amount Requested (same as # 1 on project budget) $________
B. Total Anticipated Cash Income (same as # 9 on project budget) $________
C. Total Anticipated Cash Expenses (same as # 16 on project budget) $________
D. Total Anticipated In-Kind Support (same as # 17 on project budget) $________

STATEMENT OF ASSURANCES

The applicant organization agrees that all figures, facts, and representations in this application are true and correct to the best of its knowledge and belief. It further agrees that activities and services will be administered under the supervision of the organization, and the funds received will be expended solely on the described project.

Signature of officer of applicant organization Date
Typed name and title of officer

Signature of person completing this application Date
Typed name and title of person completing this application

Submit to: Springfield Area Arts Council
420 South Sixth Street
Springfield, IL 62701

05/2015
COMMUNITY ARTS ACCESS

Grant Application FY16 (2015 - 2016)

APPLICATION DEADLINE
Postmarked or Hand-delivered by or before Friday, July 31, 2015

Please attach this checklist to the front of your application.

Organization __________________________________________________________________________

I understand that grants for the FY16 cycle will depend on the funding received by the Illinois Arts Council Agency (IACA) from the state budget and re-granted to the Springfield Area Arts Council (SAAC) through the Community Arts Access (CAA) program. I understand that funding may not be distributed until the SAAC receives its funds from the IACA.

Submit your application packet with items in the following order:

_____ One Original Signature Application set consisting of the application, narrative, and project budget forms. Please sign the original in blue ink.

_____ One copy of the organization's current Illinois not-for-profit status (annual report to Secretary of State, copy of canceled check to Secretary of State, or on-line proof of not-for-profit status; NOT the 501(c)(3) Tax Exempt Form or the 990 Form to the Attorney General)

_____ One copy of the current Officers and Board of Directors, with home addresses (used for invitations to SAAC-related events and programs only)

_____ One copy of your last completed Operating Budget (FY14 or FY15) and One copy of your current or proposed Operating Budget (FY15 or FY16)

_____ If organization received a CAA grant previously, then submit one set of up to three pieces crediting the SAAC and the IACA for previous CAA projects. If organization is a first-time applicant, then include a page stating “First Time Applicant.”

_____ Ten copies of the application, narrative, and project budget forms; paper clipped or binder clamped -- NOT STAPLED or in a folder or notebook

Attendance at Grant Workshop __________________________________________________________________________ on ________________

Signature of SAAC staff person ____________________________ Date ________________
SPRINGFIELD AREA ARTS COUNCIL
COMMUNITY ARTS ACCESS   FY16   PROJECT BUDGET

ORGANIZATION ___________________________ PROJECT ___________________________

**ANTICIPATED PROJECT INCOME**

1. Grant Request from Springfield Area Arts Council $__________
2. Admissions\Ticket Sales $__________
3. Other Revenue (Source) __________________________ $__________
4. Corporate Support (Source) __________________________ $__________
5. Foundation Support (Source) __________________________ $__________
6. Other Private Support (Source) __________________________ $__________
7. Government Support: DO NOT INCLUDE THIS GRANT. (Indicate whether Federal, State, or Local.) $__________
8. Anticipated Applicant Funds __________________________ $__________
9. **TOTAL ANTICIPATED CASH INCOME**
   (Total of lines 1-8 must be equal to or greater than line 16.) $__________

**PROJECTED PROJECT EXPENSES**

<table>
<thead>
<tr>
<th>Category</th>
<th>Cash Expenses</th>
<th>In-Kind Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Personnel/Staff (Total Cost)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative $__________</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>Artistic $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Outside Fees and Services (Total Cost)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>Administrative $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Artistic $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Space Rental</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>Location ____________________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Travel (Total Cost)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>Administrative $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Artistic $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other $__________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Marketing (Ads, posters, etc.)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>15. Remaining Operating Expenses (Identify)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>A. Materials and Supplies $__________</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>B. Insurance and Royalties $__________</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>C. Equipment Rental</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>D. Other $__________</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>16. <strong>TOTAL PROJECTED EXPENSES</strong></td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>17. <strong>TOTAL ANTICIPATED IN-KIND SUPPORT</strong></td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>18. <strong>TOTAL PROJECTED CASH EXPENSES PLUS</strong></td>
<td>$__________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

**TOTAL IN-KIND SUPPORT (Add lines 16 and 17.)** $__________

05/2015
Springfield Area Arts Council

Community Arts Access Grant FY16 (2015-2016)

CONFLICT OF INTEREST ABSTENTION RECORD

Community Access Arts Grant Panelists are in conflict if:

• currently serving as a member or officer of the Board of Directors of an applicant organization. (Past service is not a conflict.)

• an immediate family member is on the Board of Directors of an applicant organization.

• s/he or an immediate family member is a performer or active participant in an applicant organization. (Financial membership in organization does not necessarily result in conflict of interest.)

• currently serving as a fundraising event chair for an applicant organization.

I wish to record an abstention for the following grant applications:

<table>
<thead>
<tr>
<th>GRANT NUMBER</th>
<th>NAME OF APPLICANT ORGANIZATION</th>
<th>REASON FOR CONFLICT OF INTEREST</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

STATEMENT OF ASSURANCE

I assure that I will abstain from voting on those grants that may represent a possible conflict of interest between me and the grant programs of the Springfield Area Arts Council.

SIGNATURE ___________________________ DATE _________

PRINTED NAME ____________________________

There is no penalty to an organization if an abstention is recorded.

Please file this form with the grant panel chair before the panel’s selection meeting.

06/2015
Communal Arts Access Grant
FY16 Final Report -- Narrative

Organization ____________________________________________ Grant Number: CAA FY16 -
Address ____________________________________________ City ___________ Zip ___________
Email Address ___________________________ Phone Number ______________________________________

Individual Completing This Report ___________________________________________________________
Position/Title ___________________________ Phone Number _______________________________________
Title of Project/Program Funded ______________________________________________________________
Beginning Date _____________ Ending Date _____________
Illinois House # _______ Illinois Senate # _______ U. S. Congressional District # _______

Submit this Narrative Report, according to instructions, WITHIN 30 DAYS of the ending date of the project
funded by the Springfield Area Arts Council, in conjunction with the Illinois Arts Council Agency.

PLEASE DISCUSS THE FOLLOWING POINTS USING NO MORE THAN TWO PAGES.

1. Describe how the grant funds were used. Briefly note any major deviations from the project/program as
described in the original Community Arts Access Grant application (narrative and/or budget).
2. Please evaluate your project/program in terms of accomplishment of the project/program goals and its
effectiveness or impact on the participants and the audience(s) served.
3. If the project/program were to be conducted again, then would there be any change in its structure,
operation and/or scope?
4. Is the Community Arts Access Grant responsive to the needs of your organization and the
project/program funded? How can it be more effective?
5. For the funded project/program, attach copies of programs, publicity, newspaper articles, or webpage
information crediting the Springfield Area Arts Council, the Illinois Arts Council Agency, and the National
Endowment for the Arts.

This is one of two reports required. The other is a Financial Report which must be submitted on the two forms
provided.

Both reports must show completely and accurately how the project/program actually occurred.

Each report must be signed by the project/program director. Incomplete or unsigned reports will be returned.

Contact the Springfield Area Arts Council (753-3519 or programs@springfieldartsco.org) if you have questions.

Project/Program Director's Signature ___________________________ Telephone Number _____________ Date _____________

Please retain all records of this grant for three years following receipt of this award.

06/2015
### SPRINGFIELD AREA ARTS COUNCIL

**COMMUNITY ARTS ACCESS GRANT**

**FY16 FINAL REPORT -- FINANCIAL DETAIL** (Project/Program only)

<table>
<thead>
<tr>
<th>Organization</th>
<th>Grant Number</th>
<th>CAA FY16</th>
</tr>
</thead>
</table>

| Project/Program | | |
|-----------------|---------------|

**Actual Project Cash Income**

1. **Actual SAAC Grant Amount Used**  
   $ __________

2. **Admissions/Ticket Sales**  
   $ __________

3. **Other Revenue (ad sales, etc.)**  
   $ __________

4. **Corporate Support**  
   $ __________

5. **Foundation Support**  
   $ __________

6. **Other Private Support**  
   $ __________

7. **Government Support (Federal or State, not IACA)**  
   $ __________

8. **Applicant Cash (Organization’s funds used)**  
   $ __________

9. **Actual Cash Income for Project/Program**  
   $ __________

   *Must be equal to or greater than Line 16*

**Actual Project Cash Expenses**

<table>
<thead>
<tr>
<th>Actual Cash Expenses</th>
<th>Actual In-kind Contributions</th>
</tr>
</thead>
</table>
| 10. **Personnel/Staff Members:**  
   Administrative  
   $ __________  
   $ __________  
   Artistic  
   $ __________  
   $ __________  
   Technical  
   $ __________  
   $ __________ |

11. **Outside Fees and Services:**  
   Administrative  
   $ __________  
   $ __________  
   Artistic  
   $ __________  
   $ __________  
   Technical/Production  
   $ __________  
   $ __________ |

12. **Space Rental (Location ________________):**  
   $ __________  
   $ __________ |

13. **Travel:**  
   Administrative  
   $ __________  
   $ __________  
   Artistic  
   $ __________  
   $ __________  
   Technical  
   $ __________  
   $ __________ |

14. **Marketing (ads, posters, etc.)**  
   $ __________  
   $ __________ |

15. **Remaining Operating Expenses:**  
   Materials and Supplies  
   $ __________  
   $ __________  
   Insurance and Royalties  
   $ __________  
   $ __________  
   Equipment Rental  
   $ __________  
   $ __________  
   Other  
   $ __________  
   $ __________ |

16. **Actual Total Cash Expenses**  
    $ __________

17. **Actual In-kind Contributions**  
    $ __________

18. **Actual Cash Expenses and In-kind Contributions**  
    $ __________

*Please retain all records of this grant for three years following receipt of this award.*

06/2015
Springfield Area Arts Council
420 South Sixth Street   Springfield IL  62701
Phone: 217-753-3519   Fax: 217-753-8018
programs@springfieldartsco.org

COMMUNITY ARTS ACCESS GRANT
FY16 FINAL REPORT -- FINANCIAL

Grantee ___________________________________________ Grant Number  CAA FY16 -

Address ______________________________________ City ____________ Zip ____________

Email Address ____________________________________ Phone ___________________________

Individual Completing This Report __________________________

Position/Title ____________________________________ Phone ___________________________

Title of Program/Project Funded __________________________

Beginning Date ___________________ Ending Date ___________________

- Submit this Financial Report and Detail, according to instructions, WITHIN 30 DAYS of the ending date of the project funded by the Springfield Area Arts Council, in conjunction with the Illinois Arts Council Agency.
- This is one of two reports required. The other is a Narrative Report which you must complete and submit with this report.
- Both reports must show completely and accurately how the project/program actually occurred.
- Each report must be signed by the project/program director. Incomplete or unsigned reports will be returned.

Contact the Springfield Area Arts Council (753-3519 or programs@springfieldartsco.org) with questions.

SUMMARY (for this project/program only)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Springfield Area Arts Council Grant Amount Awarded</td>
<td>$ ____________</td>
</tr>
<tr>
<td>Actual Amount Used from SAAC Grant (#1 Detail)</td>
<td>$ ____________</td>
</tr>
<tr>
<td>Actual Total Cash Income (#9 Detail)</td>
<td>$ ____________</td>
</tr>
<tr>
<td>Actual Total Cash Expenses (#16 Detail)</td>
<td>$ ____________</td>
</tr>
<tr>
<td>Actual In-Kind Support (#17 Detail)</td>
<td>$ ____________</td>
</tr>
</tbody>
</table>

Project/Program Director’s Signature   Telephone Number   Date

Be sure to complete Financial Report -- Detail.

ADDITIONAL INFORMATION (needed for report to IACA)

- Total Adults benefiting from project [participants, audiences, et al] __________
- Total Youth (high school and younger) benefiting from project __________
- Total Artists participating in project [dancers, painters, et al] __________
- Total Volunteers participating in project [board, et al] __________
- Total Individuals benefiting from project (includes Adults, Youth, Artists, and Volunteers) __________

Please retain all records of this grant for three years following receipt of this award.

06/2015
Springfield Area Arts Council

COMMUNITY ARTS ACCESS GRANT AGREEMENT

GRANT NUMBER FY16 - ##

This Agreement, made and entered on September ##, 2015, by and between the Springfield Area Arts Council, a local arts agency (hereafter referred to as Grantor), and Organization (hereinafter referred to as Grantee). The Grantor and Grantee hereby agree as follows:

1. Grantor agrees to make a grant payable to Grantee in the amount of $ ###.00 for the following project/program (hereinafter referred to as Project):

   Description; Date

   If major changes are made, then the Grantee will notify the Grantor in writing.

2. All grant monies payable hereunder shall be expended by the Grantee for Project between September 1, 2015, and July 31, 2016. If for any reason Grantee needs to extend the term of the Agreement, then application must be made in writing to the Grantor prior to April 1, 2016. If no extension has been requested of and approved by the Grantor, then any monies payable hereunder that remain after completion of Project or after the date set forth above must be immediately refunded to Grantor.

3. After Grantor receives funds from the Illinois Arts Council Agency (IACA), the monies payable hereunder shall be paid to Grantee in two installments. (1) Having received from the Grantee a Cash Request and this Agreement, half of total grant will be awarded within 30 days from date the project takes place but no earlier than funding is received from the Illinois Arts Council Agency. (2) Following completion of project and receipt of Final Reports (both Financial and Narrative forms), remainder of grant (half or less, if total grant award is not expended) will be awarded.

4. Grantee agrees that all funds issued by Grantor pursuant to this Agreement shall be expended only for the specific Project described herein.

5. Grantee agrees that credit shall be given Grantor on all public notices, publicity, printed programs, public media, and other applicable material. The following language must be used in such notices:

   "This project is partially supported by a grant from the Illinois Arts Council Agency, with funding from the National Endowment for the Arts and the Springfield Area Arts Council."

6. Grantee agrees to submit the following reports to the Grantor at the times indicated:
   a. Within thirty days of the completion of the Project, Grantee shall submit Financial and Narrative Final Reports to the Grantor on the forms provided.
   b. File any subsequent requirement which may be adopted by Grantor with respect to grant reporting.

7. Grantee agrees that no person, on grounds of race, color, religion, national origin, sex, or handicap, when otherwise qualified, shall be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination under any project or activity including employment supported in whole or in part by funds provided hereunder.

8. Grantee agrees to fully comply with all rules, regulations, and other requirements now existing or which may hereafter be adopted by Grantor with respect to a grant of this nature.

9. Grantee agrees to keep Grantor informed (in writing) of changing circumstances surrounding this grant award.

Special Conditions:

SPRINGFIELD AREA ARTS COUNCIL

By Troy Roark                        By Xxxxx Xxxxx

Signature                         Signature
Title President, Board of Directors
Date September ##, 2015

GRANTEE

> The Grantee’s Board of Directors has seen and approved this request for funding of the stated project.<

By

Signature
Title Officer/Title

Date September ##, 2015

06/2015
COMMUNITY ARTS ACCESS GRANT

FY16 Cash Request

________________________________________________________________________ hereby requests the sum

Name of Organization

of $____.00 for Grant Number CAA FY16 - ##_. The start date of the project is

________________________________________________________________________; the end date is _________________.

The grant will be awarded in two (2) installments:

1. At least half of total grant within 30 days of date the project begins but no earlier than Illinois Arts Council Agency grant funds are received by the SAAC

2. Remainder of grant (half or less, if total grant award is not expended) awarded upon completion of project and receipt by the SAAC of Final Report (Narrative and Financial)

________________________________________________________________________
Federal Employer Identification Number (FEIN)

________________________________________________________________________
Organization’s Fiscal Year (e.g. October 1 – September 30)

________________________________________________________________________
Name of Authorizing Official

________________________________________________________________________
Title

________________________________________________________________________
Signature of Authorizing Official Date

________________________________________________________________________
Mailing Address City State Zip

________________________________________________________________________
Phone Number E-mail Address