

This is a preview, in hard copy, of the online application form that each applicant must fill out. It is printed here so all applicants will know what to expect in the online form.

Fill out the application form online at www.arts4ed.org/artstart/application.php and submit electronically.

Print 10 copies of the application summary report that is produced after completing the online form.

Send the 10 copies to PAE. Attach to each application the timeline, the project team list and documentation of the not for profit status of any cultural organizations on the project.

DEADLINE FOR ONLINE APPLICATION SUBMISSION:

Monday, October 27, 2008 11:59PM

DEADLINE FOR POSTAL SUBMISSION OF 10 HARDCOPY APPLICATIONS (copies for review panel)

Postmark October 27, 2008

STEP 1: PROJECT INFORMATION

Project Name (Title):

Amount Requested: \$

Proposed Partnership Dates: Beginning MM/DD/YYYY
Ending MM/DD/YYYY

Arts Curriculum Areas Addressed

Select as many as are relevant

Visual Arts Dramatic Arts

Music Arts Literary Arts

Digital Media Dance Arts

Other (Please Explain)

Non-Arts Curriculum Areas Addressed

Select as many as are relevant

English Language Arts (ELA) Health, PE, and Family and Consumer Sciences

Social Studies Languages Other than English (LOTE)

Math, Science and Technology (MST) Career Development and Occupational Studies (CDOS)

Other (Please Explain)

Who will be the **PRIMARY CONTACT PERSON** for PAE communication during the project?

Primary Contact Person First Name

Primary Contact Person Last Name

Primary Contact Title

Primary Contact Address

City

State

Zip

Primary Contact Phone

Primary Contact E-mail

SCHOOL PARTNER INFORMATION

School Name

School District

County

Building Principal First Name

Building Principal Last Name

School Mailing Address

City

State

Zip

School Phone

School E-mail

School Website

School Partner Contact Person First Name

School Partner Contact Person Last Name

Title

Phone

E-mail

CULTURAL ORGANIZATION PARTNER INFORMATION

(If Applicable)

Cultural Organization Name

Cultural Organization Mailing Address

City

State

Zip

Cultural Organization Phone

Cultural Organization E-mail

Cultural Organization Website

Cultural Organization Contact Person

Cultural Organization Contact Person Title

Phone

E-mail

TEACHING ARTIST INFORMATION

Teaching Artist First Name

Teaching Artist Last Name

Teaching Artist Discipline

Teaching Artist Mailing Address

City

State

Zip

Teaching Artist Phone

Teaching Artist E-mail

Teaching Artist Website, if applicable

Teaching Artist #2 same contact info as #1

Teaching Artist Contact Person First Name

Teaching Artist Contact Person Last Name

STEP 3: WHO WILL BE SERVED BY THIS PROJECT?

Core Group(s):

A "core group" is a set of students who meet with the same teaching artist and classroom teacher for a minimum of 3 visits.

Each visit is a "contact session." A contact session is one class period lasting a minimum of 40 minutes.

Double periods constitute one contact session.

grade	# of students/grade	# of teachers/grade	# of core groups/grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Totals	<input type="text"/>	<input type="text"/>	<input type="text"/>

Indirect Group(s) (Optional) Indirect groups are students that may participate marginally in the partnership.

grade	# of students/grade	# of teachers/grade	# of classes/grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Totals:	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of teaching artist contact sessions with each core group

Total teaching artist sessions at the school

Length of each teaching artist contact session

Amount of time between each contact session

Describe in 2-3 sentences the project for which you are seeking support.

GRANT HISTORY

Identify any partner who has been funded in the past by one of the following programs:

NYSCA : [Empire State Partnership Program (ESP) or Local Capacity Building (LCB)]

PAE: [art\$TART (CNY LCB); NYS School Arts Partnership (SAP); Technical Assistance Program (TAP)]

New York Foundation for the Arts: NYFA grants

Another Arts-in-education funder

Funding Program/Grant	Funding Year(s)	Partners from this application	Other partners on named program
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

STEP 4: PROJECT ABSTRACT

STEP 5: NARRATIVE QUESTIONS

[Click here to see the evaluative criteria used by the panel to evaluate your responses to the narrative questions...](#) (Go to page 3.)

You can copy-and-paste your responses into the narrative fields in the online form from word-processing programs:

1. THE BIG IDEA

- a. What are the shared educational and artistic goals and the expected student outcomes for this project?
- b. Does this proposal address any particular needs of this school population?

2. CURRICULUM AND INSTRUCTION

- a. List the art and non-art curricular areas on which your project will focus.
- b. Cite the primary New York State Learning Standards (i.e., ELA, MST, Arts, etc., and the number) in both the arts and non-arts curriculum areas that will be supported. Briefly describe what the students will be doing in relation to the designated standards.
- c. Provide a work plan in the form of a **timeline** of project activities to describe what will occur in the course of the project. Include planning meetings, artist contact sessions, sessions when teachers will work with students before or between artist sessions, reflection meetings and, if applicable, professional development sessions. **The timeline can be included as an attachment to the application.**
- d. Will the school arts specialists be involved in the project? If so, in what way?

3. COMMUNITY AWARENESS AND INVOLVEMENT

- a. Describe how parents and community members will be aware of and/or involved in the project.

4. REFLECTION/ASSESSMENT/EVALUATION How will you recognize success?

- a. Describe the methods you will use to reflect on the project planning and implementation (*e.g., final feedback session, interim planning meeting(s) to discuss what is and is not working*).
- b. Describe the methods you will use to capture changes in student learning (*e.g., journal writing, pre/post testing, checklists, etc.*).
- c. Identify who will be responsible for analyzing and summarizing the information you gather through your project.

5. PLANNING AND IMPLEMENTATION TEAM

- a. Attach a list of the Planning & Implementation Team Members. Be sure to include both the school and the cultural side of the partnership. Include the following information for each: Name, Address, Role in Project, Position or Affiliation, E-mail, Telephone. **This list can be included as an attachment to the application.**
- b. Briefly describe the credentials and previous experience of the selected teaching artist(s) who will be involved in the project. If a cultural organization is a partner, include its mission and not-for-profit 501c3 documentation.

6. ONE LAST QUESTION: Lessons learned

- a. If your partnership previously received arts in education funding for this project, please describe what you learned from your evaluation process and what improvements you plan to implement.

ADDITIONAL NOTES

Please include any other notes you would like us to have regarding the information you have provided on this form.

STEP 6: BUDGET INFORMATION

[Click here for detailed budget information...](#) (Go to pp. 4 – 5.)

Expenses What needs to get paid for?		Income Sources Where will the money come from?			
Expense item and description	Amount	Matching \$\$\$ sources from applicant		art\$art grant \$\$\$	Totals
	Amount	From whom?	Amount	Amount	Amount
<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	→ <input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	→ <input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	→ <input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	→ <input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	→ <input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	→ <input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
	\$ <input style="width: 80%;" type="text"/>		\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
Total Expenses			Total Income from applicant	art\$art Request	Total Income

Additional in-kind or volunteer contributions donated to applicant:

<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
<input style="width: 100%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
	\$ <input style="width: 80%;" type="text"/>
	Match Total

[Refresh Totals](#)

Budget Checklist

YES

- Does the amount in **Total Expenses** equal the amount in **Total Income**?
- Is the amount in **Match Total** equal to or greater than the amount in **art\$art Request**?
- Has at least 25% of the amount in **Match Total** been contributed by the school partner?

Required Signatures

Sign below to verify that:

1. all partners have reviewed this application narrative and budget and
2. the proposed project is not currently supported by or under consideration for funding from NYSCA or PAE.

School Contact Person

Teaching Artist/Cultural Org. Contact

School Administrator