



# Arts in Education Grant Application 2009-2010 (FY2010)



_____ SCHOOL NAME		_____ CCCA CONTACT PERSON	
_____ ADDRESS		_____ TITLE	
_____ TOWN AND ZIP CODE		_____ PRINCIPAL'S NAME	
_____ TOTAL SCHOOL ENROLLMENT	_____ % MINORITY ENROLLMENT	_____ % MINORITY FACULTY	_____ PHONE NUMBER

### Proposed Project for CCCA A-i-E Matching Grant

**Name of Artist(s)/Group:** \_\_\_\_\_

**Project Type/Art Form:** \_\_\_\_\_

**Brief Description of Artistic Goals:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Event date(s)** \_\_\_\_\_ **Number of performances** \_\_\_\_\_

**Event Time(s)** \_\_\_\_\_ **Event duration** \_\_\_\_\_

**Total Cost: \$** \_\_\_\_\_ **School Match (50% minimum): \$** \_\_\_\_\_ **Grant Request \$** \_\_\_\_\_

### Information required by our major contributors:

Number of Days _____	Grade Levels Attending _____	Artist's Fee: _____
Number of Artists/performers _____		Artist's Expenses: _____
Number of students participating directly with artists _____		Materials: _____
%Minority students participating directly with artists _____ %		Travel: _____
Number of students indirectly involved _____		Total Expenditures: _____

### Please also then indicate the overall project evaluation by school staff:

**Excellent** \_\_\_ **Very Good** \_\_\_ **Good** \_\_\_ **Adequate** \_\_\_ **Inadequate** \_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Arts Council A-i-E Chairman and administrator is Tyrone Holmes, North Caroline High School, 10990 River Rd., Ridgely, MD 21660, 410-479-2332, tyrone\_holmes@mail.cl.k12.md.us

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(410)479-1009 (voice); (410)-479-5100(fax); CCArtsCouncil@verizon.net, www.carolinearts.org

**PLEASE NOTE: We reimburse funds *after* the event takes place. Attach copies receipts or paid invoices to receive payment of your matching funds.**