



Arts in Education Grant Application 2007-2008 (FY2008)



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): _____

Project Type/Art Form: _____

Brief Description of Artistic Goals: _____

Proposed date(s) _____ Event Schedule (number of performances, time, length): _____

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

Information required by our major contributors:

Number of Days _____	Artist's Fee: _____
Number of Artists/performers _____	Artist's Expenses: _____
Number of students participating directly with artists _____	Materials: _____
%Minority students participating directly with artists _____ %	Promotion: _____
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

Caroline County Council of Arts, P.O. Box 292 Denton, MD 21629
(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 of your cancelled checks or paid invoices to receive payment of your matching funds.