

GRANT APPLICATION **2011**

Applications Due: April 30th and October 31st

Computer Formatting: **Margins:** All margins no less than .50 inch
Font type: Times New Roman or Arial
Font size: No font size smaller than 10 pts.
Spacing: Single

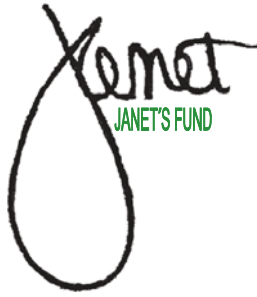
Original / Copies: Please forward completed (1) original application form. No extra copies necessary.

Support Materials: Include (1) copy of support materials with application.

Submit application to: Cincinnati Arts Association
Attention: Brenda Jones
650 Walnut Street
Cincinnati, OH 45202-2517
(513) 977-4115
bjones@cincinnatiarts.org

The **Janet's Fund** Grant Application is available for download as a Microsoft Word File or an Acrobat Reader File. Please visit <http://www.cincinnatiarts.org/janetsfund> or e-mail bjones@cincinnatiarts.org.

NOTE: A post card confirming receipt of your application materials will be sent within one week of submission. If you do not receive a post card within this time frame, call (513) 977-4115 to verify receipt.



APPLICANT INFORMATION

Please check one: Individual Artist
 Performing Arts Organization

Name of Applicant Organization: _____

Address: _____ Phone: _____

City, State, Zip: _____

County: _____

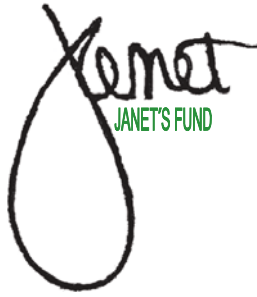
Organization Director: _____

Contact Person: _____ Phone: _____

Contact Email: _____

IRS 501(c)(3) Tax-Exempt Identification Name: _____

Organization's 501(c)(3) Number or Employee Identification # (EIN): _____



MISSION STATEMENT AND BRIEF HISTORY OF ORGANIZATION:
(Please give a brief history and mission statement)

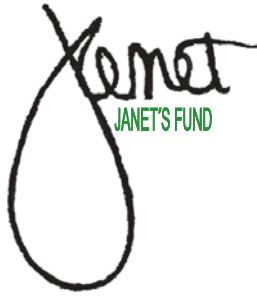
DESCRIPTION of Training or Education

Please write a clear, brief description of your proposed training.

Who in the organization will benefit from the training?

What is the desired outcome as a result of the training requested?

Where will the training take place?



PREVIOUS JANET'S FUND AWARDS

Have you received a *JANET'S FUND* grant before? _____ Yes _____ No

If yes, please complete the following section:

When was the grant awarded? _____

What amount was received? _____

What was grant used for? _____

Do you feel your objectives were realized? Please explain.

(Signature of Organization Director)

(Signature of Applicant)

(Date)

(Date)

Please forward completed application form (1 original) along with (1) copy of support materials to:

**Cincinnati Arts Association
Attn: Brenda Jones
650 Walnut Street
Cincinnati, OH 45202**