



Individual Artist Grant Application

Five Wings Arts Council - DC 6cl %% - Staples, MN 56479
218-89) !) **\$ www.fwac.org mark.turner@njpacoop.org

1. Applicant Name (Name, Address, Phone) Telephone: E-Mail: Website:	2. Location of Activities 3. Arts Discipline
4. Project Starting Date _____ *Cannot be before the review of your grant – see website for review dates) Project Ending Date _____ (Must be within one year from start date)	5. Budget Summary Total Project Cost Five Wings Grant Request* *Request cannot exceed \$ 6000

6. Brief Description including dates, time lines, location, etc. of proposed grant activity.

7. Artist Certification: I certify the information in this application is true and correct to the best of my knowledge.

Artist's Full Name

Signature

Date

Detailed Project Narrative

In the space provided, please describe in detail the purpose of this grant and how funding will help you develop as an artist in your field.

Project Budget

Applicants are required to match personal funds, donations, fellowships or other grants will be used for the project. **Round all figures to the nearest \$10**

Itemized Expenses	Other Funds	Request	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
*TOTAL	_____	_____	_____

*Total Request from Five Wings cannot exceed \$5000

Source(s) of other funds:

Enclosed Materials or Website Where Images may be Viewed:

In order for the Five Wings Arts Council to accurately review artistic quality, **work samples** and a **current personal artist resume** must accompany this application. Please enclose photos, electronic images, videos, writing samples, recordings, other sample works, etc. and list below the items you have enclosed. Your materials will be returned to you following the grant review.

- Item #1 _____
- Item #2 _____
- Item #3 _____
- Item #4 _____
- Item #5 _____
- Item #6 _____