

FY 17-18 State-Local Partnership (SLP) Grant Application

| Apply at cac.culturegrants.org

This reference document is intended to assist with preparations for the online application process at cac.culturegrants.org.

FY17-18 SLP Applicant Information

Please review the **2017-18 CAC State-Local Partnership (SLP) Guidelines for complete program information and submission requirements:** <http://www.cac.ca.gov/programs/slp.php>

For questions regarding the program Guidelines or Application, contact the SLP Project Manager below:

Jaren Bonillo, jaren.bonillo@arts.ca.gov, (916) 322-6584

Deadline: June 23, 2017, 5:00 PM

Exceptions will not be made for any submission attempts after the stated grant deadline.

Instructions:

Prior to starting an application, select the name of the CAC Culture Grants account holder from the top **and confirm that the organizational mailing address is accurate on the [My Organization](#) tab.** If necessary, update and *save* information prior to returning to this Application. **Verify that any changes have been updated below before proceeding.**

Automatic notifications from CAC Culture Grants will be sent to the email address on the My Accounts tab.

Entries and modifications are automatically saved throughout the Application. After a momentary autosave process, navigation buttons at the bottom of each screen will be accessible. Navigating between pages from the forms menu or utilizing the back/forward/refresh buttons via your web browser prior to the completion of the autosave process *will not retain your work.*

APPLICANT INFORMATION

Grant Request Amount

State-Local Partners may request up to \$35,000

Grant requests may not exceed 50% of an organization's total income from its most recently completed fiscal year.

Poetry Out Loud

Are you requesting an additional coordination award to administer Poetry Out Loud? Selecting "Yes" will activate the FY17-18 Poetry Out Loud Application form for your completion.

Note: SLPs will be required to administer Poetry Out Loud by FY18-19.

Organization Information

Legal Name of Applicant Organization *

Popular Name of Applicant Organization (optional):

Mailing Address 1*:

Mailing Address 2 (optional):

City*:

State*:

Zip Code*:

County*:

Indicate the appropriate agency type *

Nonprofit arts organization

Unit of government

Organization Phone*:

Organization Fax:

Website:

Applicant Contact First Name *:

Applicant Contact Last Name *:

Applicant Contact Title *:

Applicant Contact Phone *:

Phone Extension (if applicable):

Applicant Contact Email *:

Executive Leadership (Staff)

If different from the Applicant Contact above, provide information for the primary individual serving in a senior executive leadership capacity. In most cases, this will be the Executive Director. If title differs from "Executive Director", please enter title in the "Executive Leader Title" field below.

Executive Leader First Name:

Executive Leader Last Name:

Executive Leader Title:

Executive Leader Phone:

Phone Extension (if applicable):

Executive Leader Email:

Number of years Organization has been consistently engaged in arts programming within California *:

Date of Incorporation:

Federal EIN and DUNS Numbers

All Applicants are required to provide a Federal Employer Identification Number (Federal EIN Number) and Dun & Bradstreet Number (DUNS Number) at the time of application.

IMPORTANT: For most organizations, the two fields below will be pre-populated with the Federal EIN Number and DUNS Number as provided on the My Organization tab. If either number is **incorrect or missing**, please adjust on the [My Organization](#) tab, return to this Application, and **verify that accurate numbers have been updated below before proceeding**.

If the Applicant Organization will be applying with a Fiscal Sponsor, please leave the two fields blank below. You will be required to enter your Fiscal Sponsor's EIN and DUNS on the Fiscal Sponsor page.

Please refer to the IRS, EIN support pages, and DUNS Number Instructions for additional information.

IRS: <http://goo.gl/hGuJw> a

DUNS: <http://fedgov.dnb.com/webform>

Federal EIN Number *:

DUNS Number *:

Are you using a Fiscal Sponsor? * :

Fiscal Sponsor Form available to Applicants indicating "Yes"

FY17-18 SLP Fiscal Sponsor Form

Available for applicants designating a fiscal agent

Complete this section only if the Applicant Organization is **not** tax-exempt, and will be applying to this grant in partnership with a Fiscal Sponsor.

If your application is funded, the Fiscal Sponsor will be designated as the legal contractor for this grant from the California Arts Council. By completing this form, you are acknowledging that a Fiscal Sponsor relationship exists, and that the identified organization has agreed to serve the Applicant Organization in this capacity for the term of the Grant Period.

Legal Name of Fiscal Sponsor Organization *:

Popular Name of Fiscal Sponsor Organization (optional):

Fiscal Sponsor Date of Incorporation:

Fiscal Sponsor Federal EIN Number *:

Fiscal Sponsor DUNS Number *:

Mailing Address 1 *:

Mailing Address 2 (optional):

City *:

State *:

Zip Code *:

County *:

Executive Director First Name *:

Executive Director Last Name *:

Executive Director Phone *:

Phone Extension (if applicable):

Executive Director Email *:

Fax:

Website:

FY17-18 SLP Organization Profile

Applicant Organization's Mission, History and Purpose (may be used in CAC publications)

- State the mission of your organization and provide a brief history of your organization, its development and context for current activities.

Maximum 2,500 characters

Constituency Served

- For the county or counties served, briefly describe the geographic and demographic characteristics; the economic base; cultural diversity; and the artistic community;

Maximum 2,500 characters

County's Total Population:

Organizational Budget

DataArts Cultural Data Profile:

All applicants to this program are required to complete a [DataArts](http://www.culturaldata.org) Cultural Data Profile (CDP) profile and submit a Funder Report along with their application. Each grant program has its own Funder Report. To complete this part of your submission visit DataArts at www.culturaldata.org.

Organization's Most Recently Completed Fiscal Year:

- Provide Actual numbers for the year indicated below.
- If there are changes of more than 10% between years, please explain in the budget notes below.
- The budget snapshot must match the budget figures on your DataArts State-Local Partnership Funder Report for this same year. If these numbers do not match your DataArts Funder Report or budget, explain in the budget notes.
- *You must attach your completed DataArts Funder Report at the time of application via the Support Materials page.*

Organizational Budget

Please enter in the total revenue and expense for your organization's most recently completed fiscal year, as reported in the 2016 DataArts State-Local Partners funder profile.

	FY15-16 or 16 (Actual)
TOTAL: Revenue	
TOTAL: Expense	
TOTAL: Surplus (Deficit)	\$ 0

FY17-18 SLP Proposal Narrative

Grant Request Summary

Briefly outline your proposal and indicate how grant funds would be used. This description will be used to introduce your proposal to the panel. If funded, it will be used to describe your approved grant.

Please begin your summary with the following:

With support from the California Arts Council, (insert Applicant Organization Name here) will...

Maximum 500 characters

Local Arts Networking

- **Provide an overview of the programs and services that specifically meet the goals and objectives of the State-Local Partnership Program.**

Maximum 2,000 characters

- **Describe your organization's relationship to other arts organizations and businesses in the County.**

Maximum 2,000 characters

- **Tell us if your County has a Cultural Plan, your organization's involvement in the development and implementation that Cultural Plan, and how the plan advances arts and cultural development at the county level.**

If no plan exists, discuss how your current programs accomplish this or your actions to support the development of a Cultural Plan.

Maximum 2,000 characters

Community Engagement

- **Describe your organization's outreach efforts to include and respond to community needs.**

Maximum 2,000 characters

- **Provide an overview on the reach of your programs and services throughout the County.**

Maximum 2,000 characters

- **Describe plans to broaden the organization's constituency reflective of all cultures of the County.**

Maximum 2,000 characters

Access and Equity

- **Describe how your programs promote and foster cultural and ethnic diversity of the arts.**

Maximum 2,000 characters

- **Describe any efforts to reflect the diversity (i.e. socioeconomic, geographic, multicultural, etc.) of your constituents and County throughout your organization.**

Maximum 2,000 characters

- **Describe your organization's efforts to make programs and services accessible to all.**

Maximum 2,000 characters

Fiscal Leadership and Management

- **Provide an overview of how your organization is staffed to serve the administrative needs of the organization.**

Maximum 2,000 characters

- **Briefly detail any advisors or consultants providing support to your organization including their experience and roles.**

Maximum 2,000 characters

- **Provide a detailed description of the governing body, including diversity, approach to developing policies, and fiscal oversight.**

Maximum 2,000 characters

Does your organization employ an experienced full-time professional arts and nonprofit administrator? Yes/No

Title and Annual Salary of administrator, if applicable:

- Title:
- Annual salary:

Finances

- **Describe your organization's plans for fiscal growth to support quality programs and services, and to meet budget projections.**

Maximum 2,000 characters

- **Describe your relationship with your local government including the department that provides an annual appropriation, partnerships and collaborations. If no relationship exists, please describe your plans for developing a partnership with your local government.**

Maximum 2,000 characters

Does your organization receive an annual appropriation from your local government? Yes/No

Annual appropriation amount:

- **Please explain large variations in income, expenses and surplus (deficit) positions from year to year reflected in your DataArts profile, including programmatic activity.**

Maximum 2,000 characters

SLP Grant Request Amount

Request up to \$35,000 for SLP General Operating support.

Grant requests may not exceed 50% of an organization's total income from its most recently completed fiscal year.

Amount must be matched 1:1.

Grant Request: Budget Detail Instructions

In the Budget Detail below, provide details for each line item to be funded by this grant. For Personnel, please fill in the fields to provide information in the Job Title & # of Staff and Rate of Pay. **Total Expenses must match your "Total Grant Request Amount."**

Matching Funds

All grant recipients must provide a dollar-for-dollar (1:1) match. Use the Matching Funds column to show your planned allocation of these additional funds. The match ratio may vary per line item, and matching funds may be indicated for line items other than the CAC Request.

Grant Request: Budget Detail

A. Personnel Expenses	Job Title & # of Staff in ()	Rate of Pay (per year, month, hour, or service)	CAC Request	Matching Funds
1. Artistic			\$ 0	\$ 0
			\$ 0	\$ 0
			\$ 0	\$ 0
2. Administrative			\$ 0	\$ 0
			\$ 0	\$ 0
			\$ 0	\$ 0
3. Technical			\$ 0	\$ 0
			\$ 0	\$ 0
			\$ 0	\$ 0
		SUBTOTAL: Personnel Expenses	\$ 0	\$ 0
		B. Operating/ Production Expenses	CAC Request	Matching Funds
		4. Facility Rental	\$ 0	\$ 0
		5. Equipment Rental	\$ 0	\$ 0
		6. Travel (in-state)	\$ 0	\$ 0
		7. Regranting	\$ 0	\$ 0
		8. Office Supplies	\$ 0	\$ 0
		9. Postage	\$ 0	\$ 0
		10. Printing	\$ 0	\$ 0
		11. Utilities	\$ 0	\$ 0
		12. Insurance	\$ 0	\$ 0
		13. Fundraising	(CAC funds may not be used)	\$ 0
		14. Other	(describe below)	\$ 0
		SUBTOTAL: Operating/ Production Expenses	\$ 0	\$ 0
		TOTAL EXPENSES	\$ 0	\$ 0
		GRAND TOTAL (CAC Request plus Matching Funds)	\$ 0	

Total Matching Funds should equal, but not exceed the required matching funds amount; do not overmatch your CAC Request.

After completing the Budget Detail table, **select Save** at the bottom of this page to refresh your screen. Verify that the "Total Expense: CAC Request" matches your Grant Request Amount above.

Budget Detail Notes

If providing figures for Operating/Production Expenses, "Other", please describe below.

Maximum 1,000 characters.

Source of Match Table

Indicate the source, amount and status (Projected, Pending, or Committed) of your matching funds.

The cash match may be from federal or local government agencies, foundation, corporate, individual contributions, or earned income. Other State agency funds may not be used as a match. In some instances, in-kind donated services for which fair market value can be determined may be used, up to a maximum of 50% of the required match. Contact the CAC Project Manager for this grant, to determine eligibility prior to including in-kind as a portion of your match.

The Total from Matching Fund Sources should equal Total Matching Funds (as well as Total CAC Request) from the Budget Detail, provided above.

If applicable, identify "Other Contributed", "Earned Income", and "In-Kind" sources below the Source of Match table.

Income Type	Provide Match Source	Match Amount	Status (Projected, Pending, Committed)
Federal Government		\$ 0	
Local Government/ County		\$ 0	
Local Government/ City		\$ 0	
Foundation		\$ 0	
Corporate		\$ 0	
Individuals		\$ 0	
Other Contributed	(describe below)	\$ 0	
Earned Income	(describe below)	\$ 0	
In-Kind (may not exceed 50% of the Total Match)	(describe below)	\$ 0	
Total from Matching Fund Sources		\$ 0	

Source of Match Notes

If providing figures for "Other Contributed", "Earned Income", or "In-Kind", please identify the corresponding Match Source(s) below. If utilizing in-kind donated services to support the match requirement, please describe your method for determining the fair market value of these services. *Maximum 1,000 characters.*

FY17-18 SLP Quantitative Questions

Figures entered below should reflect the totality of **anticipated activities and individuals to be directly affected by or involved in programs and services if funded by** this CAC grant, and occurring within the grant period. **Leave blank any items that are not applicable or for which you do not have supportable estimates.**

Based on the anticipated impact of this CAC grant, please use the space below to briefly indicate if quantitative numbers reflect the totality of your programming, or a smaller portion of your programming.

Maximum 250 characters.

Anticipated Programs and Services

1. # of artworks

Can include student works, adaptations, re-creations, or re-stagings of existing works

2. # of free events

3. # of concerts/performances/readings

4. # of lectures/demonstrations/workshops/symposiums

5. # of classes or sessions

Classes or sessions in which students will develop artistic and creative skills

6. # of exhibitions curated/presented

Include visual arts, media arts, films, film festival, and design. Count each curated film festival as a single exhibition

7. # of artists' residencies

Artists' activities in schools or other community settings over an extended period of time.

8. # of nonprofit organizational partners

Organizations that combine resources and will work together

9. # of for-profit business partners

Businesses that combine resources and will work together. Do NOT include funders unless they will actively participate.

10. # of governmental agency partners

Agencies that combine resources and will work together. Do NOT include funders unless they will actively participate.

11. # of apprenticeships/internships

12. # of hours broadcast on radio, television, cable, web or other digital networks

For series, include hours for all broadcasts. Include broadcasts that will occur after the end date of the project only if they will be a direct result of the funding of this award. Do NOT include public service announcements, advertising, or other promotional activities, or Web-casts.

13. # of other events

If providing figures for the question above, please specify "other" anticipated events:
Maximum 250 characters.

Individuals Involved

Enter the total number of individuals who will be involved with the funded activity/activities. This includes the categories of Artists participating and Children/Youth Benefitting as well as actual audience numbers and other non-artist project participants.

1. # of artists directly involved

Artists involved in providing artistic services

2. # of youth benefiting

Enter the total number of children and youth benefiting directly from the anticipated activity/activities.

3. # of total individuals benefiting

Enter the total number of individuals who will directly be involved with the anticipated activity/activities. This includes the categories of Artists Participating and Children/Youth Benefitting, as well as, actual audience numbers and other non-artist project participants

FY16-17 SLP Support Materials

Support Materials Form Overview

Review each section below, prior to uploading support materials:

1. Required Support Materials
2. Optional Support Materials
3. Accepted File Types
4. File Upload Instructions
5. Uploaded Materials area and tools
6. Upload Quota display

Required Support Materials

Select the checkbox below each required item to confirm successful uploads.

Local Government Resolutions *

Applicants must obtain a Resolution from their local government (County Board of Supervisors or City Council) that designates the applicant organization as a partner in the State-Local Partnership program, and authorizes it to execute the grant, if awarded. Attach your current Resolution with the application. If it does not include the SLP Grant Period (October 1, 2016 through September 30, 2017), a new resolution will need to be submitted prior to October 1, 2016 to be eligible for funding.

Date Resolution Signed:

Range of Effective Dates:

DataArts Funder Report *

Attach a copy of your DataArts CDP Funder Report for this specific CAC grant program.

Key Staff Biographies *

Provide brief biographies (**not resumes**) for the following individuals. Include title, experience, and role within the proposed grant: Key Administrative Personnel; Artistic Personnel; any Consultants to be paid or hired with CAC support. Indicate where positions are new, to be supported by grant funds.

Governing Body *

Provide a current list of Board of Directors, Commissioners, Committee, or other appropriate members of your governing body. For each individual, provide their 1) name; 2) expertise; 3) role on governing body; 4) professional affiliations; 5) city of residence; and 6) county of residence.

Strategic Plan, Executive Summary *

Provide an Executive Summary of your organization's current strategic plan.

Strategic Planning Description

If a current Strategic Plan is not in place, please explain your existing policies and/or procedures, and timeline for developing one.

Maximum 1,000 characters.

Cultural Plan, Executive Summary *

Provide an Executive summary of the County's Cultural Plan, if applicable.

Cultural Planning Description

If a current Cultural Plan is not in place, please explain your existing policies and/or procedures, and timeline for developing one.

Maximum 1,000 characters.

Letter(s) of Support *

Letters of Support from key stakeholders, partners, or collaborators. Letters should substantiate the quality of the organization, its programs and services, and affirm the organization's impact on its constituents. Submit a minimum of one (1), maximum of (3).

List of Grantees

Provide a current list of grantees, **if applicable**. For each grantee, provide their 1) organization's name; 2) award amount; 3) project description; 4) city of operation.

Optional Support Materials

Submitting the following materials will allow you to further clarify or illuminate your organization's activities, programs, and services. The peer review panel will spend no more than 5 minutes reviewing the work.

General Support Materials

Upload up samples of materials generated within the past two years that best portray the work of your organization. These may include items such as brochures, posters, flyers, programs, newsletters, and news articles.

Artistic Work Samples

- Audio/Video of dance, theater, music, media, multidisciplinary, interdisciplinary or performance art. You may include up to 2 videos or audio samples totaling no more than 5 minutes. Video files are provided through links per File Upload Instructions below.

- Images of visual art or other work. You may submit up to 10 images of professional work from one or multiple artists representative of your organization's activities.

Samples should be of materials generated within the past two years that best portray your organization's artistic work and/or relevance to your constituents.

Accepted File Types

Images

Option 1: Upload images as individual JPGs. Recommended resolution: 300 dpi. Recommended image size: 800 x 600 pixels. If scanning images, please scan at a resolution of 300 dpi and save/upload as individual JPGs. Size per image file may not exceed 10 MB.

Option 2: Combine images within one PDF. Size per document may not exceed 5 MB.

Audio

Upload recordings in MP3 format only (recordings may be up to 5 mins long). Size per audio file may not exceed 50 MB.

Video (links)

Video files may not be uploaded directly. Provide video selections as online links (URLs) on a single-page PDF or MS Word document. Videos may be hosted on Vimeo, YouTube, or your organization's website. Non-password protected videos are preferred; if protected, be sure to provide password information. Do not submit links to websites which require video content to be downloaded. Preferred length is no more than 5 minutes, per video.

Documents

Upload PDF or MS Word documents only. Do not submit more than 10 total document files. Size per document may not exceed 5 MB.

File Upload Instructions

Step 1 - Select a File

There are two recommended upload options within the Uploaded Materials section below.

- Click the **Select Files** button to open a window, where you can select **Open**, **Browse** or **Choose File** (depending on your browser) to select a file from your computer.
- **Drag and drop** files from an existing File Explorer (Windows) or Finder (Mac) window into the indicated target area

Step 2 - Enter Title and Description

After selecting your file, In the uploader pop-up window, provide a **Title** (required) and a brief **Description** (optional, but recommended) in the appropriate fields. Make titles specific; avoiding file names such as "Image #1."

Step 3 - Submit

Click **Save Changes** to upload the file. After the file is successfully uploaded, the pop-up window will close, and a thumbnail of the file will appear on the Support Materials upload area.

Repeat steps 1 through 3 for additional files.

Uploaded Materials

FY16-17 SLPP Application-FY16-17 (0 MB)

Drag & drop your files here or press + Select Files Copy File from Another Application

No uploaded materials found.

Upload Quota

User storage 0 out of 400 Mb used

Image Document Audio

Save your work frequently by selecting the **Save** button below. Selecting **Previous** or **Next** buttons, or utilizing the back/forward buttons via your web browser will neither retain, nor save your work.

FY17-18 SLP POL Application

Poetry Out Loud Coordinator Information

POL Coordinator First Name*:

POL Coordinator Last Name*:

POL Coordinator Title*:

POL Coordinator Phone*:

Phone Extension (if applicable):

POL Coordinator Email*:

How has your organization administered Poetry Out Loud in your county in past years? Please describe specific activities.

Maximum 1,000 characters.

What activities do you plan to execute this coming year? How do these activities build upon past successes and/or respond to challenges faced in prior years?

If this is your first year administering POL, how do you plan to leverage partnerships to ensure successful completion of the project?

Maximum 1,000 characters.

\$800 of the grant is to be used to retain Poetry Teaching Artists and/or to provide POL training for classroom teachers.

How do you plan to use the Coaching and Teacher Training funds? *

Poetry Teaching Artist Fees
Classroom Teacher Training
Both

If you plan to engage in professional development for classroom teachers, please describe intended activities below (e.g. workshop participation, hiring a consultant to meet with a teacher cohort, etc.).

Maximum 1,000 characters.

What is the anticipated date for your County Finals competition? This must occur no later than February 15, 2018. *

Participating Schools 1-20

Please provide the following information regarding anticipated participating schools for 2017-18. *A minimum of two confirmed participating schools is required. You will have the opportunity to amend this information as necessary prior to December 1, 2017.*

Participating Schools 1-10

Please provide the following information regarding anticipated participating schools for 2016-17.

A minimum of two confirmed participating schools is required. You will have the opportunity to amend this information as necessary prior to December 1, 2016.

Name of School District	Name of School	Prior POL Participation? (Y/N)	Name of Key School Contact, Title	Contact Phone	Contact E-mail
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

POL: Budget Detail

PLEASE NOTE: The table below should reflect an award of \$1,500 for program administration, \$800 for coaching and training activities, and the student travel stipend as indicated by county in the table here.

While matching funds are not required for the POL grant in FY 2017-18, we encourage all applicants to commit matching funds to the program as they are able.

A. Administrative Expenses	List Expense	CAC Request	Matching Funds (optional)
		0	0
		0	0
		0	0
	SUBTOTAL: Administrative Expenses (\$1,500 CAC Request)	\$ 0	\$ 0
B. Coaching & Training Expenses	List Expense	CAC Request	Matching Funds (optional)
		0	0
		0	0
		0	0
	SUBTOTAL: Coaching & Training Expenses (\$800 CAC Request)	\$ 0	\$ 0
C. Student/Chaperone Travel Stipend	SUBTOTAL: Student/Chaperone Travel Stipend	\$ 0	\$ 0
	TOTAL EXPENSES	\$ 0	\$ 0
	GRAND TOTAL: CAC Request plus Matching Funds	\$ 0	

FY17-18 SLP Certification and Release

This Certification and Release must be signed by an authorized board member or designated organizational representative with the knowledge of the matters contained herein, and holds the legal authority to obligate the organization, with the approval of the organization’s board of directors or other governing body.

The undersigned certifies: the represented organization has proof of nonprofit status under sec.501(c)(3) of the Internal Revenue Code, or under sec. 23701d of the California Revenue and Taxation Code, or is a unit of government; that applicant has been consistently engaged in arts programming for a specific number of years prior to time of application; complies with the Civil Rights Act of 1964, as amended; sec 504 of the Rehabilitation Act of 1973, as amended; the Age Discrimination Act of 1975; observes provisions of the Drug Free Workplace Act of 1988; and California Government Code secs.11135-11139.5 (barring discrimination); complies with the Fair Labor Standards Act, as defined by the Secretary of Labor in part 505 of title 29 of the Code of Federal Regulation; the Americans with Disabilities Act of 1990; and the Fair Employment and Housing Act; has its principal place of business in California; and has completed prior contract evaluations, if applicable; and has approval of the organization's board of directors or other governing body.

That all information contained herein is accurate or represents a reasonable estimate of operations based on data available at the time of submission; and that there are no misstatements or misrepresentations contained herein or in any attachments.

The undersigned hereby releases the California Arts Council (CAC) and the State of California, their employees & agents, from any liability and/or responsibility concerning damage to or loss of materials submitted to the CAC and the State of California, whether or not such damage of loss is caused by the negligence of the CAC, the State of California, their employees & agents.

Signature

By providing your information below and submitting this CAC Application, you are certifying that you meet all requirements as a signatory, and that you understand, confirm, and/or agree to all terms of the Certification and Release for this grant.

First Name

Last Name

Title

Date

ATTENTION: Applications to the 2017-18 CAC State-Local Partnership grant program must be submitted online through CAC Culture Grants no later than June 23, 2017, 5:00 PM.

Exceptions will not be made for any submission attempts after the stated Application deadline (date and time).

Submitting your Application:

When you are ready to submit your Application (having verified the completion of all required fields and information, and the upload of all required support materials), select the green **Save and Validate** button below.. Alternately, you may select **Validate and Submit** from the Application forms navigation table.

Incomplete required fields will be listed on a validation page with corresponding error messages. Click on the name of the required field to be taken to the specific location within your Application. Address all listed fields and select the green **Submit** button to finalize the Application process.

After the successful submission of this Application, a confirmation email will be sent to the email address of the CAC Culture Grants account holder. Verify this email address on the user profile, [My Account](#) tab. Please refer to the instructions within the confirmation email and forward to additional staff, as necessary.