

# 25039 - TestApplication - Short Order

## Application Details

---

**Funding Opportunity:**

25029-Short Order Project 2024-01 (Arts In Education, Dance, Multidisciplinary Arts/Culture, Music, Theater, Visual Arts and Local History) - Copy

**Funding Opportunity Due Date:**

**Program Area:**

**Status:**

**Stage:**

**Initial Submit Date:**

**Initially Submitted By:**

**Last Submit Date:**

**Last Submitted By:**

## Contact Information

---

### Primary Contact Information

**Name:**

Salutation First Name Middle Name Last Name

**Title:**

**Email\*:**

**Address\*:**

City State/Province Postal Code/Zip

**Phone\*:**

Phone Ext.  
### ### #####

**Fax:**

### ### #####

### Organization Information

**Name\*:**

**Organization Type\*:**

**Organization Website:**

**Address\*:**

City State/Province Postal Code/Zip

**Phone\*:** ###-###-####

**Fax:** ###-###-####

**Date when organization received 501(c)(3)  
federal tax-exempt status (mm/dd/yyyy):** (mmdyyyyy)

## Project Information

---

Primary activities must fall within project period described in Funding Opportunity.

**Project Start Date\*:**

**Project End Date\*:**

**Select category that best describes project  
(selection influences which advisory panel  
reviews application)\*:**

**Date(s) during which community can attend  
and/or participate in project\*:**

**Specific venue(s) or location(s) where  
community will attend and/or participate in  
project\*:**

[Estimate Number of Individuals Engaged or Served](#)

[Estimate Primary Community/Population Served](#)

[Ethnicity:](#)

**Black/African American\*:**

**American Indian\*:**

**Asian American\*:**

**Hispanic/Latino\*:**

**White/Caucasian\*:**

**Other\*:**

**Combination of all ethnicities:**

[Age Group\(s\):](#)

**Youth (less than 18)\*:**

**Adult (18 to 30)\*:**

**Adult (31 to 60)\*:**

**Older Adult (60 plus)\*:**

**Dane County Supervisory District\*:**

Indicates the communities your project will serve. To look up your district(s):

**Community/Population Description\*:**

Additional notes about community/population served that explain selections. (Max. length is 50 words)

Provide a one or two sentence summary that could be used in future press releases to describe your project. (Max. length is 50 words.)

**Abstract\*:**

**Applicant Type\*:**

## Fiscal Receiver / Secondary Contact Information

Use this section to enter the contact information for your Fiscal Receiver, if your organization is using one. If you are not, you may use this section to provide information for an additional project contact person, if appropriate.

**Fiscal Receiver:**

**Contact Person:**

**Title:**

**Mailing Address:**

**Phone:**

**Email:**

**How did you hear about this opportunity?:**

## Project Narrative

Describe who you are (applicant), project you plan to conduct, and how you will present to the community. (350 words maximum)

**Project Description\*:**

Describe intended audience, marketing plans, and benefit to Dane County. (350 words maximum)

**Audience & Public Value\*:**

How will you know if project achieves goals and how will you measure its success? (350 words maximum)

**Evaluation\*:**

## Budget

### Project Expenses (Cash)

Category	Explanatory Notes (25 char. limit)	Expense Covered by Grant	Cash Amount
Expense 1			
Expense 2			
Expense 3			
Expense 4			
Expense 5			
Expense 6			
Expense 7			
Expense 8			

### Project Income (Cash)

Category	Explanatory Notes (25 char. limit)	Status	Amount
Income 1			
Income 2			
Income 3			
Income 4			
Income 5			
Income 6			
Income 7			
Income 8			

### In-Kind (Non-Cash)

Row	Explanatory Notes (25 char. limit)	Status	Amount
In-Kind 1			
In-Kind 2			
In-Kind 3			
In-Kind 4			

**Budget Narrative**

Additional explanation of budget figures. Be sure that any explanation of budget figures in this section matches the budget figures included above.

**Budget Summary**

Category	Total Cash Expenses	Total Cash Income	Total In-Kind (Non-Cash)	Total Request Amount	Total Request Percentage	Total Budget
Grant Request Amount						

**Attachments/Supplemental Materials**

Named Attachment	Required	Description	File Name	Type	Size	Upload Date
IRS federal tax-exempt 501(c)(3) determination for your organization or fiscal receiver						
<b>Required for Applicants (Using a Fiscal Receiver Only)</b>						
Letter of Commitment from Fiscal Receiver						
<b>Required</b>						
<i>Please make sure that this letter is signed (electronic is fine) and dated.</i>						
Current Letter of Support #1						

**Other Optional Attachments**

Named Attachment	Required	Description	File Name	Type	Size	Upload Date
Current Letter of support #1 from the community at large (highlighting artistic quality/merit, public value, commitment, ability to implement successfully) – suggested especially for first-time applicants						
Work Sample						
Logo or Image (to be used in listing project/program on a website if awarded a grant)						
Other						

**Authorization/Certification**

**Fields**

**Applicant/Authorized Official\*:**

**Title\*:**

**Date Signed\*:**