

Connect (for Community Organizations) Application 2026

This project is made possible with funds from the Statewide Community Regrants Program, a regrant program of NYSCA with the support of the Office of the Governor and the New York State Legislature and administered by the Arts Council for Wyoming County.

Community Arts Grants provide support to community-based organizations, groups, collectives or artists for arts and cultural projects. This program enables emerging artists and organizations to grow professionally and to enhance the cultural climate in communities and neighborhoods where they live and work. Community Arts Grants can fund but are not limited to: exhibitions, performances, concerts (all disciplines), festivals, demonstrations and workshops, screenings or readings.

This is a competitive process. All applications are extensively evaluated according to the criteria and priorities. Through Connecting Communities Arts Grants, the Arts Council for Wyoming County, NYSCA and the NYS Legislature hope to expand, enhance and increase arts and cultural programs in our community.

APPLICATION DEADLINE January 9th, 2026, 4 PM

- Deadline for Review of applications, December 15th, 2025, 4pm.
- 2026 Final Reports are due no later than 30 days after the completion of the project. All reports must be submitted by January 31, 2027.
- Submit your application and the accompanying materials to by the deadline to:

BY EMAIL to grants@artwyco.org. This is the preferred method for submission.

IN PERSON AT ACWC, 31 South Main, Perry.

OR BY MAIL:
ACWC Grants Coordinator
Arts Council for Wyoming County
PO Box 249
Perry, NY 14530

Application Checklist – Required Application Materials:

	Attenu an application seminar or set up an appointment for a meeting with the
	ACWC Grants Coordinator. Date of attendance or contact:
	Completed application form, narrative, budget and timeline. Be sure to sign (get sponsor
	signatures if applicable).
	Updated resume/CV and artist(s) statement(s) or other descriptive text of creative work for
	applicant teaching artist. If a group, this includes each member. If a non-profit arts
	organization, include cooperative work.
	Samples/images/videos of previous work that supports the proposed project. (Email
	grants@artwyco.org with files or links to websites, shared drives or other online sources for
	all content. (Physical examples of work must be delivered to ACWC.)
	For Pre-K-12 In-School or After-School Projects (A) : Letter of Commitment from the partner
Ш	school to the arts organization or teaching artist. Refer to guidelines.
	For Community Based Learning (B): Letter of Commitment which details the partner's
	support of the project and anticipated roles and responsibilities for each partner involved.
ш	Refer to guidelines.
	For applications submitted with a Fiscal Sponsor : Letter of Agreement from the sponsor that
	clearly outlines the administration of the grant and defines mutual responsibilities.
	Letter of endorsement or cooperation from proposed site or other relevant entities with
	interest or involvement in project.
	For applicant artist or lead artist: proof of Wyoming or Allegany County Residency.
	Type of Proof attached: (NOTE: all documents must contain the individual's name and
	address and must be dated no earlier than two years prior to an application):
	Telephone Bill
	Utility Bill
	Credit Card Statement (first page only; social security and financial information should
	be blocked)
	Current lease or mortgage agreement listing the artist's name and address
	NYS Driver's License or ID card
	Voter registration card
	Other requirements from Organizational applicants:
	Board of Directors roster (names and addresses)
	Financial statement of the last completed fiscal year
	Proof of non-profit status – refer to guidelines
	WORKPLAN AND RUBRIC including lesson plans, evaluation plan, and participant evaluation
	forms.

APPLICATION - SECTION 1: PROJECT INFORMATION

Please refer to program guidelines for specific, detailed instructions. Use no larger than 12 pt type. ALL INFORMATION IS REQUIRED.

Applicant Address: Media/Artform Type of Applicant: If yes, specify fiscal sponsor? Artist Art	Project Tit	le:											
Media/Artform Type of Applicant:	Applicant:												
Type of Applicant: Artist Group	Applicant A	Address:											
Do you have a fiscal sponsor? If yes, specify fiscal sponsor: County: Allegany County	Media/Art	form											
Do you have a fiscal sponsor? If yes, specify fiscal sponsor: County: Allegany County Wyoming County	Type of Ap	plicant:		Artist			Artis	t Group			Non	-Profit A	Arts
If yes, specify fiscal sponsor: County: Allegany County Employee Identification Number (EIN) (For non-profits or fiscal sponsors) Proposed site of project: Address of proposed site of project: City: NY Zip: Contact Person #1: Person who receives emails, check and attends Awards Email: Contact Person #2 Email: Community-Based Partner: (leave blank if there is no partner) Dates (s) / Time(s) of project: How many events will take place as part of this project? (For groups, such as bands, count each artist; for non-profits or cooperative artists applying, include total number of artists involved in project) Target Audience: Anticipated number served TOTAL: Anticipated percentage served per category: Children: Teens: Adults: Seniors: Special Needs: What accommodations are in place for people with disabilities? (200 characters max): Political Districts: NYS Sensembly: NYS Senset: US Congress:											Orga	nizatio	1
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ridec you ever applied to it i sen.			ed to N	IYSCA?	l .				Year				

BELOW: FOR NON-PROFIT APPLICANTS OR FISC	AL SPUNSUR	RS:
Non-Profit Applicants – Fiscal Year Runs:	From:	То:
Year Organization was formed/incorporated:		
Please share below your mission statement or	briefly descr	be the purpose and activities of your
organization (limit 500 characters)		
For Organizational Applicants or Sponsoring Or	ganizations -	- Non-Profit Status: <i>Check one that</i>
applies and submit a copy of the document pro	of with this o	application.
US Internal Revenue Service 501	(c)(3)	
NYS Charities Registration (Articl	e 7A)	
Unit of Local Government		
NYS Federally Recognized Tribal		
NYS Not-For-Profit Corporation (- · · · · · · · · · · · · · · · · · · ·
Certificate of Incorporation unde	er S.402 of th	e NYS Not-For-Profit Law
SECTION 2: PROJECT NARRATIVE: Your proposal will be evaluated based on this answer the following questions within this do questions. If a separate document is needed, response. Please follow character limits indicate.	cument . Ins please inclu	ert responses below corresponding de the numbered questions with each
Question 1: What is your project? What are y	ou seeking g	grant funds to do? (1000 characters)

Question 2: Discuss the artists you have chosen for this project; how many artists will you work with? What makes those artists the "right fit" for your project? (1000 characters)
Question 3: Other than artists, how many people will be directly and actively involved with carrying out the project or event? What are their roles? (500 characters)
Question 4: How do you plan to market this project? (For example: advertising, press releases, website, flyers, email, outreach, etc.; list publications.) (500 characters)

Question 6: Hov	w will you evaluate the s	uccess of your project? (500 characters)
	ct (for example: all interv	riews will be completed by May 31; all photos will b
orinted by Octo	ber 15; 5 of 15 poems w	ill be completed by April 10). (1000 characters)
orinted by Octo	ber 15; 5 of 15 poems w	
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Question 8 – FC	DR REPEAT PROJECTS ON	ill be completed by April 10). (1000 characters) **TEY: Describe any changes you will make in your pro
Question 8 – FC	DR REPEAT PROJECTS ON	ill be completed by April 10). (1000 characters) **TEY: Describe any changes you will make in your pro

SECTION 3: BUDGET NARRATIVE:

This section replaces a separate budget form and budget notes. Please respond to the following budget related questions and provide the budgeted amounts for each. Refer to the Budget section of the Community Arts Grants Guidelines & Instructions for details concerning eligible/ineligible expenses and amount limits, etc. DO NOT INCLUDE IN-KIND FIGURES; complete the separate in-kind section to include estimated donations of time and materials.

BUDGET TABLE

USE THIS TABLE TO RECORD TOTAL BUDGET EXPENSES, INCOME AND GRANT REQUEST

STEP 1: Complete the Expenses section, below, and enter total of all "Budget" Items A through I.	TOTAL:	\$
STEP 2 : Complete the Income section of your budget, below. DO NOT INCLUDE COMMUNITY ARTS GRANTS FUNDS AS INCOME.	TOTAL:	\$
STEP 3: Subtract above Income total from Expenses total. ***THIS IS YOUR GRANT REQUEST***	GRANT REQUEST	\$
STEP 4 : Complete "Grant Request" sections of Expenses Ite indicating the amount of GRANT REQUEST you plan to use		. ,

ADDITIONAL INSTRUCTIONS: Complete both Expenses and Income sections FIRST. Once GRANT REQUEST is determined (above table, STEP 3), complete STEP 4 of BUDGET TABLE. NOTE: total of all "Grant Request" figures must equal GRANT REQUEST in BUDGET TABLE, above. GRANT REQUESTS MAY RANGE FROM \$1000 TO \$7500.

EXPENSES

Items A through I: Include Budget for each & describe in spaces provided.

Item A: Administrative Personnel: Describe the budgeted amount for staff the project: positions, estimated hours and rates. (300 characters)

Budget \$	Grant Request \$	

Item B: NON Personnel: Artist Fees. Add totals for artists/artist groups or art organizations your will hire for your project to determine budget (this includes fees for artist applicant(s). DO NOT INCLUDE ARTIST'S SUPPLIES COST IN THIS CATEGORY. Included supplies fees must be detailed separately in SUPPLIES category (Item E). (300 characters)

Budget \$	Grant Request \$	
tem C: NON Personnel:	Technical/Artistic. List any technical/arti	istic personnel for this project
(such as lighting, directo	ors, choreographers, framers, videograph	ers, etc.), rates & totals for
each and add to determ	ine budget. (300 characters)	
Budent C	Cumpt Populat C	
Budget \$	Grant Request \$	
ltem D: NON Personnel	: Other. Please detail any other paid conti	ractors, such as ushers.
	itors, graphic designers; their rates and to	,
, ,	tors, grupnic designers, their rates and to	ituis joi euch, una totai. (300
characters)		
Budget \$	Grant Request \$	
Dauget \$	Crame nequest \$	

Item E: Consumable Supplies / Materials; Equipment Rental*. GRANT REQUEST MAX: \$1000 Please describe the supplies and materials that you will need to purchase to carry out the project, and how they will be used. Detail quantities needed, cost for each and totals. Include any amount to rent equipment to be used for the project. (300 characters)

*PLEASE NOTE: EQUIPMENT PURCHASE IS NO LONGER PERMITTED AS A PROJECT EXPENSE.

*Fill box on top of next page for Item E.

	Grant Request \$
_	ransportation. What transportation needs within your county will be paid for project? Please break down the costs associated with this need. (300
Budget \$	Grant Request \$
	· · · · · · · · · · · · · · · · · · ·
Item G: Marketi	ng / Advertising / Promotion. Describe costs for advertising the project.
	al media ads, print ads, posters, etc. (You will use the separate in-kind section,
below, to estima	te values of free social media promotions, press, etc.). (300 characters)
,	e values of free social media promotions, press, etc.). (500 characters)
Budget \$	Grant Request \$
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-	
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Budget \$	Grant Request \$
Budget \$ Item H: Remainin	Grant Request \$ ng Operating Expenses. Detail any other operating expenses related to the
Budget \$ Item H: Remaining project, such as s	Grant Request \$
Budget \$ Item H: Remaining project, such as sections characters)	Grant Request \$ Ing Operating Expenses. Detail any other operating expenses related to the oftware subscriptions, insurance, etc. How is each needed for the project? (300)
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Budget \$	Grant Request \$	
OTAL EXPENSES		
_	"expense figures. Use this figure to \$	
complete BUDG	ET TABLE at top of SECTION 3 (STEP 1).	
	: Include Budaet for each & describe in spaces provided	(Parts 1 & 2). Enter
tems J through U	l: Include Budget for each & describe in spaces provided in BUDGET TABLE, above (STEP 2). Character limits apply	•
tems J through U the total income i	in BUDGET TABLE, above (STEP 2). Character limits apply	•
Items J through U the total income i PART 1: EARNED I Item J: Admission	in BUDGET TABLE, above (STEP 2). Character limits apply	y.
tems J through U the total income i PART 1: EARNED i	in BUDGET TABLE, above (STEP 2). Character limits apply INCOME: s. How many are expected to attend? What is the ticket/a	y.
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Budget	\$	
5		
tem M: Ad Revenue. Will you collect funds to How much will you collect for each and how n eflect this. (300 characters)		-
Budget	\$	
	. drinks, and/or any retail items? Plea	se describe.
	drinks, and/or any retail items? Plea	se describe
Budget tem O: Earned Income: Other. Please describ	\$	
Item N: Sales / Concessions. Will you sell food (300 characters) Budget Item O: Earned Income: Other. Please describerary other category. Budget	\$	

Item L: Tuition / Workshop Fees. What fee will each person pay to attend classes, workshops,

PART 2: CONTRIBUTED INCOME

Budget	\$	
	ect sponsorships from any businesses or organizations these and how much each will contribute.	
Budget	\$	
	sources and total funds for each? Are these funds rest se expenses? (Please do not include anticipated Comm	
o specific expenses? What are thos		
o specific expenses? What are thos Arts Grants funds in this total.)	se expenses? (Please do not include anticipated Comm	
o specific expenses? What are thos Arts Grants funds in this total.) Budget	se expenses? (Please do not include anticipated Comm	nuni

Budget	\$
tem U: Contributed Income: Other. Contributed income tha ategory. (300 characters)	t does not fit clearly into any oth
Budget	\$
SUBTOTAL, PART 2: Contributed Income. Add Budget INCOME figures P. through U.	######################################

IN KIND CONTRIBUTIONS

What is being donated / contributed? Include quantities	\$ Value / Unit Estimated value of each unit (such as per hour, per piece,	Total Value of contribution
TOTAL IN KIND		\$

Applicant's Signature and Date:

I certify that all statements made in this application are true to the best of my knowledge. I have read the guidelines of the ACWC Community Arts Grant Program and certify that this application complies with and is made subject to said guidelines. I certify that I reside in Allegany or Wyoming County and have done so for at least six months prior to the application deadline. I certify that I am at least 18 years of age, and that I am not enrolled as a full-time undergraduate student. I acknowledge that the Arts Council for Wyoming County is not liable for damage or loss of materials submitted.

Name (print):
Signature:
Date:
Sponsoring Agency Representative, if applicable (person legally eligible to obligate the not-for-profit organization)
Name (print):
Signature:
Date: