



Community Arts Grant Application 2026: Mentor Grants (Arts Ed)

This project is made possible with funds from the Statewide Community Re grants 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, 2026, 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 grants@artwyco.org. If sending large files, contact Grants Coordinator for further instructions.**
- **IN PERSON AT ACWC, 31 South Main, Perry.**
- **OR MAIL:**

**ACWC Grants Coordinator
Arts Council for Wyoming County
PO Box 249
Perry, NY 14530**

Application Checklist – Required Application Materials:

<input type="checkbox"/>	Attend an application seminar or set up an appointment for a meeting with the ACWC Grants Coordinator. Date of attendance or contact:
<input type="checkbox"/>	Completed application form, narrative, budget and timeline. Be sure to sign (get sponsor signatures if applicable).
<input type="checkbox"/>	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.
<input type="checkbox"/>	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.)
<input type="checkbox"/>	For Pre-K-12 In-School or After-School Projects (A): Letter of Commitment from the partner school to the arts organization or teaching artist. <i>Refer to guidelines.</i>
<input type="checkbox"/>	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. <i>Refer to guidelines.</i>
<input type="checkbox"/>	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.
<input type="checkbox"/>	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: <i>all documents must contain the individual's name and address and must be dated no earlier than two years prior to an application</i>):
<input type="checkbox"/>	Telephone Bill
<input type="checkbox"/>	Utility Bill
<input type="checkbox"/>	Credit Card Statement (first page only; social security and financial information should be blocked)
<input type="checkbox"/>	Current lease or mortgage agreement listing the artist's name and address
<input type="checkbox"/>	NYS Driver's License or ID card
<input type="checkbox"/>	Voter registration card
	Other requirements from Organizational applicants:
<input type="checkbox"/>	Board of Directors roster (names and addresses)
<input type="checkbox"/>	Financial statement of the last completed fiscal year
<input type="checkbox"/>	Proof of non-profit status – <i>refer to guidelines</i>
<input type="checkbox"/>	WORKPLAN AND RUBRIC including lesson plans, evaluation plan, and participant evaluation forms.

APPLICATION: SECTION 1

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

Project Title:					
Applicant:					
Applicant Address:					
Media/Artform					
Type of Applicant:	<input type="checkbox"/> Artist	<input type="checkbox"/> Artist Group	<input type="checkbox"/> Non-Profit Arts Organization		
Do you have a fiscal sponsor?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, specify fiscal sponsor:					
GRANT CATEGORY (Select One):					
<input type="checkbox"/>	Arts Education: Pre-K – 12 th In-school or After school (A)		<input type="checkbox"/>	Arts Education: Community Based Organization (B)	
County:		Allegany County		Wyoming 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: Artist, Lead Artist, or Director/Project Lead					
Email:			Phone:		
Contact Person #2: (Teacher Partner for school projects – Type A)					
Email:			Phone:		
Pre-K through 12 School (A) or Community Based (B) Partner:					
Arts Education (A) Teacher Partner(s)					
How many artist contact days are planned for this project?					
How many artists will participate in the project? (For groups, such as bands, count each artist; for non-profits or cooperative artists applying, include total number of artists involved in project)					
Anticipated number of students served:					
Anticipated attendance at community event:					
Target Grade Level:					
What accommodations are in place for people with disabilities? (200 characters max):					
Political Districts:					
NYS Assembly:		NYS Senate:		US Congress:	
Have you ever applied to NYSCA?				Year Applied?	

BELOW: FOR NON-PROFIT APPLICANTS OR FISCAL SPONSORS:			
Non-Profit Applicants – Fiscal Year Runs:		From:	To:
Year Organization was formed/incorporated:			
Please share below your mission statement or briefly describe the purpose and activities of your organization (limit 500 characters)			
For Organizational Applicants or Sponsoring Organizations – Non-Profit Status: <i>Check one that applies and submit a copy of the document proof with this application.</i>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US Internal Revenue Service 501(c)(3)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NYS Charities Registration (Article 7A)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unit of Local Government
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NYS Federally Recognized Tribal Nation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NYS Not-For-Profit Corporation (Charter from Board of Regents S.216)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certificate of Incorporation under S.402 of the NYS Not-For-Profit Law

SECTION 2: PROJECT NARRATIVE:

Your proposal will be evaluated based on this narrative, so be as thorough as possible. Please answer the following questions ***within this document***. Insert responses below corresponding questions. If a separate document is needed, please include the numbered questions with each response. **Please follow character limits indicated for Section 2 responses.**

Question 1: What is your project? What are you seeking grant funds to do? (1000 characters)

Question 2: How many people will be directly and actively involved with carrying out the project or event? What are their roles? (500 characters)

Question 3: Describe the group to be served by this project. Who are the learners? How many are there and how will they benefit? (1000 characters)

Question 4: For Artists (including artist groups or arts organizations): Discuss your work and how it qualifies you to carry out this project. Secondly, how will you benefit? (1000 characters max)

Question 4 – FOR REPEAT PROJECTS ONLY: Describe any changes you will make in your project this year, and the ways these changes will improve the project. (500 characters)

Question 5: ATTACHMENTS.

Please attach a WORKPLAN for this project, which includes:

1. Detailed descriptions of the **roles** of teacher(s), students and teaching artist(s), and anyone else involved in the project.
2. **Goal(s)** of the activity and how success will be evaluated.
3. **Timeline** for completion milestones throughout the proposed project. This information should be reviewed with a representative of partnering organization/school and teacher partner, as applicable, and signed by you, the partner, and, if applicable, sponsor representative.
4. A **rubric** and project evaluation process.

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 Items A. through I., below, by indicating the amount of GRANT REQUEST you plan to use for each expense.		

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. ARTS EDUCATION 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. **Note: grant funds may not be used to pay teachers or school personnel.** (300 characters)

Budget \$		Grant Request \$	

Item B: NON Personnel: Artist Fees. Add totals for artists/artist groups or art organizations 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 \$	

Item C: NON Personnel: Technical/Artistic. List any technical/artistic personnel for this project (such as lighting, directors, choreographers, framers, videographers, etc.), rates & totals for each and add to determine budget. (300 characters)

Budget \$		Grant Request \$	

Item D: NON Personnel: Other. Please detail any other paid contractors, such as ushers, concession workers, janitors, graphic designers; their rates and totals for each, and total. (300 characters)

Budget \$		Grant Request \$	

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.**

Budget \$		Grant Request \$	

Item F: Travel / Transportation. What transportation needs **within your county** will be paid for to carry out this project? Please break down the costs associated with this need. (300 characters)

Budget \$		Grant Request \$	

Item G: Marketing / Advertising / Promotion. Describe costs for advertising the project. Include paid social media ads, print ads, posters, etc. (You will use the separate in-kind section, below, to estimate values of free social media promotions, press, etc.). (300 characters)

Budget \$		Grant Request \$	

Item H: Remaining Operating Expenses. Detail any other operating expenses related to the project, such as software subscriptions, insurance, etc. How is each needed for the project? (300 characters)

Budget \$		Grant Request \$	

Item I: Other Expenses. Describe any expenses you will have that do not fit into any other category & the need for them. (300 characters)

Budget \$		Grant Request \$	

TOTAL EXPENSES (next page)

TOTAL EXPENSES

Add all “**Budget**” expense figures. Use this figure to complete **BUDGET TABLE** at the top (**STEP 1**). \$

INCOME

Items J through U: Include Budget for each & describe in spaces provided (Parts 1 & 2). Enter the total income in **BUDGET TABLE**, above (**STEP 2**). Character limits apply.

PART 1: EARNED INCOME:

Item J: Admissions. How many are expected to attend? What is the ticket/admission or requested donation amounts? Total should reflect this. (300 characters)

Budget	\$

Item K: Membership Dues. What portion of membership funds will be dedicated to this project? (300 characters)

Budget	\$

Item L: Tuition / Workshop Fees. What fee will each person pay to attend classes, workshops, lectures, etc., and how many are expected to attend? Will there be a separate fee for supplies? Please describe in detail below. (300 characters)

Budget	\$

Item M: Ad Revenue. Will you collect funds to advertise in a program or in some other way?

How much will you collect for each and how many total ads do you expect to have? Total should reflect this. (300 characters)

Budget	\$

Item N: Sales / Concessions. Will you sell food, drinks, and/or any retail items? Please describe. (300 characters)

Budget	\$

Item O: Earned Income: Other. Please describe any earned income that does not fit clearly into any other category.

Budget	\$

SUBTOTAL, PART 1: Earned Income. Add Budget INCOME \$ figures J. through O.

PART 2: CONTRIBUTED INCOME

Item P: Donations. Will any donations be collected dedicated to this project? Describe. (300 characters)

Budget	\$

Item Q: Sponsorships. Will you collect sponsorships from any businesses or organizations toward this project? If possible, list these and how much each will contribute.

Budget	\$

Item R: Grants. Describe any grant sources and total funds for each? Are these funds restricted to specific expenses? What are those expenses? **(Please do not include anticipated Community Arts Grants funds in this total.)**

Budget	\$

Item S: Fundraising. What fundraising is planned and how much do you expect to earn from it? (300 characters)

Budget	\$

Item T: Organizational Contribution. Has your organization budgeted any funds to pay for any part of this project? How much and what expense will it cover? (300 characters)

Budget	\$

Item U: Contributed Income: Other. Contributed income that does not fit clearly into any other category. (300 characters)

Budget	\$

SUBTOTAL, PART 2: Contributed Income. Add Budget \$
INCOME figures P. through U.

TOTAL INCOME

Add **SUBTOTALS** of both Earned (PART 1) and Contributed (PART 2) Income. Use this figure to complete **BUDGET TABLE** at top of **SECTION 3 (STEP 3)**.

IN KIND CONTRIBUTIONS: any donations that would otherwise be expenses

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: _____