***St. Mary’s County Arts Council, Inc.***

***FY 2019 Arts in Education Program***

**ARTS IN EDUCATION GRANT (AIE)**

**APPLICATION**

# DEADLINE: Email this application to “[info@smcart.org](mailto:info@smcart.org)” no later than Friday, November 2 2018 or February 15, 2019.

**Submit only this page** to the SMCAC as your AIE Grant Application.

1. **General Information**

*Please type as much information as required in each block.*

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **School/Educational Facility Name** | | | | | | | |  | | |
| **Mailing Address** | | |  | | | | | | | |
| **Principals Name** | | | |  | | | | | | |
| **School Telephone** | | | | |  | | | | | |
| **School email** |  | | | | | | | | | |
| **Liaison’s Name** | |  | | | | | | | | |
| **Liaison’s Home Phone** | | | | | | |  | | | |
| **Liaison’s Cell Phone** | | | | | |  | | | | |
| **Liaison’s Personal/Home Email** | | | | | | | | | |  |
| **Student Population of School** | | | | | | | | |  | |

1. **Artistic Programming Information**

*Please type as much information as required in each block.*

|  |  |  |
| --- | --- | --- |
| **Name of Artist(s)** |  | |
| **Project Type/Art Form** | |  |
| **Proposed DATE(S) of project(s)** | |  |
| **Goals of Project**  *(be specific)* |  | |

1. **Financial Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Projected** Income and Expenses for the Project: | | | | | |
|  |  | |  |  |  |
| *Income* | | |  | *Expenses* | |
| SMCACAIE Grant Requested | |  |  | Artist’s Fee |  |
| Local Match | |  |  | Artist’s Expenses |  |
| **Total:** | | **$** |  | Materials |  |
|  |  | |  | Promotion/Documentation |  |
|  |  | |  | **Total:** | **$** |