

# #INDYKEEPSCREATING

## Eligibility

I am 18 years of age or older:

True, I am eligible

False, I am not eligible

I am legally allowed to work in the United States and can provide a W-9 and either a Social Security Number (SSN), an individual Taxpayer identification number (TIN), or A-Number/USCIS Number:

True, I am eligible

False, I am not eligible

I am a resident of Marion County:

True, I am eligible

False, I am not eligible

## Application Information

Lead applicant's contact information

Name of organization (if applicable):

Contact first name:

Last name:

Phone number:

Email:

Street address:

City:

State:

Zipcode:

Council District:

Participating partners

Please list the Organization (if applicable), Name, Title, Email, and Role for each participating partner:

## Proposal

Event Title:

Program or event location address:

Neighborhood served:

Start date:

End date:

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Can this date be flexible: Y/N

1. Proposal description (Maximum 2,500 characters)
2. If this is an ongoing or annual event, please share with us a brief history of the event or program. (Maximum 1,250 characters)
3. Timeline of neighborhood engagement program or project (Maximum 1,000 characters)
4. Key artist biography. If you have more than one KEY artist in your group, please use this space to submit brief bios (Maximum 600 characters each) for each participant. Begin each bio with the name of the participant.
5. How does this project connect to the needs of your community? Please describe the communities you plan to engage and what you hope to achieve through community engagement. \*For projects that have already been completed please describe how your project met the needs of your community, which communities were engaged and the overall community impact. (Maximum 3,000 characters)
6. Please briefly describe what the funds will be used for. (Maximum 1,000 characters)
7. Is this program free or affordable to the public? YES/NO  
\*Note: priority will be given to free events, but funding is available to community-based options that are not free but affordable within the given community standards.
8. Briefly describe how this program or event is open, affordable, and accessible to the public. (Maximum 1,000 characters)

## Artist demographics Chart Attachment

[Microsoft Excel Download](#)

[PDF Download](#)

Do key partners or artists reside in the neighborhood being served? Y/N

Underserved/Distinct Groups served: (Select all that apply)

- Individuals with Disabilities
- Individuals in Institutions (include people living in hospitals, hospices, nursing homes, assisted care facilities, correctional facilities, and homeless shelters)
- Individuals below the Poverty Line

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- Individuals with Limited English Proficiency
- Military Veterans/Active Duty Personnel
- Youth at Risk
- Other underserved/distinct group
- No specific underserved/distinct group

## Required Attachments

- [Completed Budget form](#)
  - [Excel Download](#)
  - [PDF Download](#)
- Artist cv/resume and website
- If an existing annual event please upload photos from previous years.
- For reimbursement projects: additional documentation of the event (photos, videos, or links) and invoice(s) for contracting artists are required