FY20 Arts Residencies in Schools

Grant Application Form

You can find a PDF of the FY20 ARSG Guidelines [here](https://www.creativemoco.com/sites/default/myfiles/FY20%20ARSG%20Guidelines_1.pdf). **All applications must be submitted online through** [**FluidReview**](https://artsandhumanities.fluidreview.com/)**. AHCMC cannot accept applications submitted by mail or email.**

# Basic Information

**Please address one residency at a time.** You will have the opportunity to address your second residency (if applicable) within a different section of the application.

# Artist

|  |  |
| --- | --- |
| First Name |  |
| Last Name |  |
| Address |  |
| City |  |
| Zip Code |  |
| Email |  |
| Phone Number |  |

# School

|  |  |
| --- | --- |
| School Name |  |
| Address |  |
| City |  |
| Zip Code |  |
| School Representative |  |
| Title |  |
| Email |  |
| Phone Number |  |

# Have you submitted an FY19 Final Report?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes |  | No |  | N/A, I did not apply for this grant in FY19 |

# Project Overview

# Grant Request

At least $1,000 and no more than $6,000

# Total Cost of Residency

# Residency Start Date

Must be between January 1, 2020 and December 31, 2020

\_\_/\_\_/\_\_\_\_ (MM/DD/YYYY)

# Residency End Date

Must be between January 1, 2020 and December 31, 2020

\_\_/\_\_/\_\_\_\_ (MM/DD/YYYY)

**Please briefly describe your residency.**

2,000 characters maximum.

**Grant funds will be used for/to…**

# Residency Logistics

We recognize that these may be estimates and/or averages.

|  |  |
| --- | --- |
| Total number of participating students |  |
| Grade level(s) |  |
| Total number of sessions |  |
| Number of students per session |  |
| Length of each session (in minutes) |  |

# Residency Appropriateness (50 points)

This criterion will measure:

* The degree to which the residency is appropriate for the intended students and has been tailored to appropriately meet the needs of the students
* The degree to which the residency serves students from communities that have traditionally received insufficient resources and that have limited access to arts education experiences throughout the school year

# How will you select students to participate in the residency?

 2,000 characters maximum.

# Why is the residency appropriate for the selected students, and how has the residency been tailored to meet their needs?

Please describe the demographics of the student population that will participate in the residency and how this has been considered in your program development. 2,000 characters maximum.

# How are the students that benefit from the residency underserved?

Please site the school wide [FARMS rate](https://creativemoco.sharepoint.com/%3Ab%3A/g/EWkqgmKFJMhHr5UlEixU8nUB-urTOU2akso3jn0e4-84dw?e=DglIoV) or the specific programs for ESOL or SPED students. To be eligible, the program must serve students at a school with a FARMS rate greater than 35%, as listed on the [MCPS Schools at a Glance](https://www.montgomeryschoolsmd.org/departments/regulatoryaccountability/glance/currentyear/SAAG2018.pdf) and/or, students within a defined program that serves ESOL students, and/or students with disabilities. 2,000 characters maximum.

# Collaboration and Curriculum (20 points)

This criterion will measure:

* Evidence that the classroom teacher has been involved in co-planning the residency and establishing goals for student learning
* The degree to which the activities reinforce the learning standards in the arts subject
* The degree to which the program effectively addresses the Montgomery County and/or Maryland State curriculum

# How will you engage in collaborating with the Classroom Teacher to plan the residency and establish goals for the students?

2,000 characters maximum.

# List the specific indicators and objectives from the Montgomery County and/or Maryland State curriculum that you will address during this residency.

**Please describe your reasoning and how the indicators and objectives will be addressed during the residency**. Click [here](https://www.montgomeryschoolsmd.org/curriculum.aspx) to view the Montgomery County curriculum standards. Click [here](https://mdk12.msde.maryland.gov/INSTRUCTION/Pages/InstructHome.aspx) to view the Maryland State curriculum standards. 2,000 characters maximum.

# Evaluation (20 points)

This criterion will measure:

* The degree to which there is an appropriate evaluation process planned for the program to determine if the intended learning goals have been accomplished for the residency

# How will you determine whether the intended objectives of the residency have been accomplished?

 2,000 characters maximum.

# Budget (10 points)

This criterion will measure:

* The degree to which the budget is appropriate for the scope of the program and the number of students served

# Residency Expenses

Please enter ALL project expenses. **You must place an asterisk (\*) next to expenses that will be paid for by AHCMC grant funds**. Please review pages 3-4 of the guidelines for a detailed description of allowable project expenses. **Do not** include “miscellaneous” or “contingency” expenses. Only use numbers in the amount column, **do not** include symbols such as “$” or “,”.

|  |  |  |
| --- | --- | --- |
|  | Cash Expenses | Amount |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| If items are being donated, i.e. supplies or services, please list those items under “In-Kind”. |
|  | In-Kind Expenses | Amount |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

# Total Residency Expenses: FluidReview will calculate this total

# Residency Income

**The first line item must be "AHCMC Grant".**

|  |  |  |
| --- | --- | --- |
|  | Cash Income | Amount |
| 1 | AHCMC Grant |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| If you entered in-kind (donated) items in the chart above, please re-enter those same items under “In-Kind” in the chart below. |
|  | In-Kind Income | Amount |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

# Total Residency Income: FluidReview will calculate this total

# Budget Notes

Provide additional information about the line items in your budget. For example, if "Performer Fees $1,500" is listed in your budget, provide details about this line item here. The more detail the better! Do not forget to describe the in-kind contributions (goods, services, or discounts) allocated for the project. 2,000 characters maximum.

# Will you be using funds to conduct a second residency?

**If “No”, please ignore the rest of this form.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

 |  |

# Is the school information the same?

**If “Yes”, please skip ahead to the “Project Overview” section**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

# Second Residency Information

If any of the answers to the following questions are the same as the first residency, please write "**No change**" as the response.

# School Information for Second Residency

|  |  |
| --- | --- |
| School Name |   |
| Address |   |
| City |   |
| Zip Code |   |
| School Representative |   |
| Title |   |
| Email |   |
| Phone Number |   |

# Project Overview

# Grant Request

The **combination** of the grant request for your first and second residency must be **at least** **$1,000 and no more than $6,000.**

# Total Cost of Residency

# Residency Start Date

Must be between January 1, 2020 and December 31, 2020

\_\_/\_\_/\_\_\_\_ (MM/DD/YYYY)

# Residency End Date

Must be between January 1, 2020 and December 31, 2020

\_\_/\_\_/\_\_\_\_ (MM/DD/YYYY)

# Please briefly describe your residency.

2,000 characters maximum.

**Grant funds will be used for/to…**

# Residency Logistics

We recognize that these may be estimates and/or averages.

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| --- | --- |
| Total number of participating students |  |
| Grade level(s) |  |
| Total number of sessions |  |
| Number of students per session |  |
| Length of each session (in minutes) |  |

# Residency Appropriateness (50 points)

This criterion will measure:

* The degree to which the residency is appropriate for the intended students and has been tailored to appropriately meet the needs of the students
* The degree to which the residency serves students from communities that have traditionally received insufficient resources and that have limited access to arts education experiences throughout the school year

# How will you select students to participate in the residency?

 2,000 characters maximum.

# Why is the residency appropriate for the selected students, and how has the residency been tailored to meet their needs?

Please describe the demographics of the student population that will participate in the residency and how this has been considered in your program development. 2,000 characters maximum.

# How are the students that benefit from the residency underserved?

Please site the school wide [FARMS rate](https://creativemoco.sharepoint.com/%3Ab%3A/g/EWkqgmKFJMhHr5UlEixU8nUB-urTOU2akso3jn0e4-84dw?e=Ifky1w) or the specific programs for ESOL or SPED students. To be eligible, the program must serve students at a school with a FARMS rate greater than 35%, as listed on the [MCPS Schools at a Glance](https://www.montgomeryschoolsmd.org/departments/regulatoryaccountability/glance/currentyear/SAAG2018.pdf) and/or, students within a defined program that serves ESOL students, and/or students with disabilities. 2,000 characters maximum.

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This criterion will measure:

* Evidence that the classroom teacher has been involved in co-planning the residency and establishing goals for student learning
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* The degree to which the program effectively addresses the Montgomery County and/or Maryland State curriculum

# How will you engage in collaborating with the Classroom Teacher to plan the residency and establish goals for the students?

2,000 characters maximum.

# List the specific indicators and objectives from the Montgomery County and/or Maryland State Curriculum that you will address during this residency.

**Please describe your reasoning and how the indicators and objectives will be addressed during the residency**. Click [here](https://www.montgomeryschoolsmd.org/curriculum.aspx) to view the Montgomery County curriculum standards. Click [here](https://mdk12.msde.maryland.gov/INSTRUCTION/Pages/InstructHome.aspx) to view the Maryland State curriculum standards. 2,000 characters maximum.

# Evaluation (20 points)

This criterion will measure:

* That there is an appropriate evaluation process planned for the program to determine if the intended learning goals have been accomplished for the residency

# What assessment technique(s) will you have in place to determine whether the intended objectives of the residency have been accomplished?

 2,000 characters maximum.

# Budget (10 points)

This criterion will measure:

* That the budget is appropriate for the scope of the program and the number of students served

# Residency Expenses

Please enter ALL project expenses. **You must place an asterisk (\*) next to expenses that will be paid for by AHCMC grant funds**. Please review pages 3-4 of the guidelines for a detailed description of allowable project expenses. **Do not** include “miscellaneous” or “contingency” expenses. Only use numbers in the amount column, **do not** include symbols such as “$” or “,”.

|  |  |  |
| --- | --- | --- |
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| 2 |  |  |
| 3 |  |  |
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| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| If items are being donated, i.e. supplies or services, please list those items under “In-Kind”. |
|  | In-Kind Expenses | Amount |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

# Total Residency Expenses: FluidReview will calculate this total

# Residency Income

**The first line item must be "AHCMC Grant".**

|  |  |  |
| --- | --- | --- |
|  | Cash Income | Amount |
| 1 | AHCMC Grant |  |
| 2 |  |  |
| 3 |  |  |
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| 5 |  |  |
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| 7 |  |  |
| 8 |  |  |
| If you entered in-kind (donated) items in the chart above, please re-enter those same items under “In-Kind” in the chart below. |
|  | In-Kind Income | Amount |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

# Total Residency Income: FluidReview will calculate this total.

# Total Expenses for both Residencies: FluidReview will calculate this total.

# Total Income for both Residencies: FluidReview will calculate this total.

# Budget Notes

Provide additional information about the line items in your budget. For example, if "Performer Fees $1,500" is listed in your budget, provide details about this line item here. The more detail the better! Do not forget to describe the in-kind contributions (goods, services, or discounts) allocated for the project. 2,000 characters maximum.