

FY22 Arts Residencies in Schools Grants (ARSG) Narrative Template

This template is for your reference only. All applications, work samples, and supplement materials must be submitted online through SurveyMonkey Apply (SM Apply). AHCMC cannot accept anything by mail or email.

Please note that there may be formatting differences on the SM Apply grants portal, however the content of the questions will remain as seen on this template.

All required questions are marked with an asterisk (*). All text responses have a character count that includes spaces.

Submit this application no later than **Friday, October 29, 2021 at 11:59 p.m.**

Basic Information

***Applicant Legal First Name:**

***Applicant Legal Last Name:**

Artist/Scholar Name, if different:

***Address (P.O. Boxes not accepted):**

***City:**

***State:**

***ZIP Code:**

***Phone Number:**

***Email:**

Website:

***Select your primary discipline as an artist. ([Click here to access the eligible disciplines on the AHCMC website.](#))**

- | | | |
|--|---|---|
| <input type="radio"/> Dance | <input type="radio"/> Media | <input type="radio"/> Writing |
| <input type="radio"/> Folk & Traditional Arts | <input type="radio"/> Music | <input type="radio"/> Visual Arts |
| <input type="radio"/> History and/or Social Sciences | <input type="radio"/> Philosophy, Ethics, and/or Comparative Religion | <input type="radio"/> Design |
| <input type="radio"/> Languages, Linguistics, and/or Literary Arts | <input type="radio"/> Storytelling | <input type="radio"/> Presenting and/or Multidisciplinary |
| | <input type="radio"/> Theatre | <input type="radio"/> Other (please specify): |

Eligibility Questions

***Are you listed on the AHCMC Teaching Artist Roster and/or the [Maryland State Arts Council's \(MSAC\) Teaching Artist Roster](#)?** AHCMC's Teaching Artist Roster is permanently closed; however, applicants who were previously approved to be on AHCMC's Roster are eligible to apply.

- AHCMC Teaching Artist Roster
- MSAC Teaching Artist Roster
- Both
- Neither

***Do you have an established a relationship with a public or non-public elementary, middle, or high school based in Montgomery County, MD?**

- Yes
- No

***Have you resided in Montgomery County, MD for at least 12 consecutive months prior to the application deadline?**

- Yes
- No

***Are you at least 21 years of age?**

- Yes
- No

***Are you a full-time student?**

- Yes
- No

***Are you able to provide AHCMC with a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) prior to undertaking the grant activities?**

- Yes
- No

Residency 1 Basic Information

***School Name:**

***Address:**

***City:**

***State:**

***ZIP Code:**

***School Representative:**

***School Representative Title:**

***School Representative Phone Number:**

***School Representative Email:**

***The school is a:**

- Public school in Montgomery County, MD
- Non-public school in Montgomery County, MD

***Is the school-wide FARMS rate greater than 35%? [Click here to search the school's FARMS rate and specific programs.](#)**

- Yes
- No
- The residency will specifically serve students within a clearly defined program that serves ESOL students or students with disabilities, as listed on MCPS Schools at a Glance web page or equivalent for non-public schools.

***Give a short summary of the 1st residency.** (750 characters maximum with spaces) **This summary will be used in public materials. AHCMC reserves the right to edit the summary for clarity.*

***AHCMC 1st Residency Grant Request:**
(Must be at least \$1,000 and no more than \$6,000.)

***Total 1st Residency Cost:**
(May exceed \$6,000 and should include in-kind costs, if applicable.)

***1st Residency Date start and end dates:**
(Must be between 1/1/2022 and 12/31/2022)

1st Residency Logistics

We recognize that the numbers below 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):

***How many residencies are you applying for?**

- 1
- 2

***If applying for 2, will they be at the same school or different schools?**

- Same school
- Different school

Residency 2 Basic Information

The following section regarding school information will not be visible for those doing one residency or a second residency at the same school.

***School Name:**

***Address:**

***City:**

***State:**

***ZIP Code:**

***School Representative:**

***School Representative Title:**

***School Representative Phone Number:**

***School Representative Email:**

***The school is a:**

- Public school in Montgomery County, MD
- Non-public school in Montgomery County, MD

***Is the school-wide FARMS rate greater than 35%?** [Click here to search the school's FARMS rate and specific programs.](#)

- Yes
- No

- The residency will specifically serve students within a clearly defined program that serves ESOL students or students with disabilities, as listed on MCPS Schools at a Glance web page or equivalent for non-public schools.

***Give a short summary of the 2nd residency.** (750 characters maximum with spaces) **This summary will be used in public materials. AHCMC reserves the right to edit the summary for clarity.*

***AHCMC 2nd Residency Grant Request:**

(Must be at least \$1,000 and no more than \$6,000.)

***Total 2nd Residency Cost:**

(May exceed \$6,000 and should include in-kind costs, if applicable.)

Total AHCMC Grant Request: *Will autofill*

(Must be at least \$1,000 and no more than \$6,000.)

***2nd Residency Date start and end dates:**

(Must be between 1/1/2022 and 12/31/2022)

2nd Residency Logistics

We recognize that the numbers below 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):

Applicants who are applying for two residencies will have a second response box with an equal character count per narrative question.

Residency Appropriateness (50 points)

- Appropriateness of the residency for the selected students;
- Tailored to meet the needs of the selected students; and
- 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 and the collaborating classroom teacher select students to participate in the residency?**

(2,500 characters maximum with spaces).

***Why is the residency appropriate for the selected students and how will the residency be tailored to meet their needs?** Describe the demographics of the student population who will participate in the residency and how this has been considered in your program development. (2,500 character maximum with spaces)

***How will the residency benefit students who have traditionally received insufficient resources, including limited access to arts education throughout the school year?** Reference the school-wide FARMS rate or the specific programs that benefit ESOL students and/or students with disabilities, as listed on the school's [MCPS Schools at a Glance webpage](#). (2,500 character maximum with spaces)

Collaboration & Curriculum (20 points)

- Evidence that the classroom teacher has been involved in co-planning the residency and establishing goals for student learning; and
- Activities effectively address the Maryland State curriculum to reinforce the learning standards in the arts subject.

***How will you collaborate with the classroom teacher to plan the residency and establish goals for the students?** (2,500 characters maximum with spaces).

***List the specific indicators and objectives from the Maryland State curriculum that you will address during this residency and describe how the specific indicators and objectives will be addressed.** [Click here to view the Maryland State Curriculum Standards](#). The Montgomery County Public School (MCPS) curriculum is aligned with the Maryland State Standards. (2,500 character maximum with spaces)

Evaluation (20 points)

- 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?** (2,500 characters maximum with spaces).

Budget (10 points)

- Budget is appropriate for the scope of the residency and the number of students served.

- Applicants must retain a portion of the budget to compensate themselves for their work.

1st Residency Budget

SurveyMonkey Apply will have a fillable chart for this section. **Applicants who are applying for two residencies will have a second budget chart and budget notes section.**

- **Your budget must be balanced: total expenses MUST equal total income.**
- Do not use the dollar sign or symbols such as a comma in the amount column.
 - Ex: If you'd like to enter one thousand dollars, type 1000 rather than \$1000 or \$1,000.
- If you need more space, you may combine items budgeted under \$1,000 into one line item and explain in the budget notes.

*Cash Expenses

- List all residency expenses, including expenses that may be paid for from sources other than the AHCMC grant award. (Review page 5 of the FY22 ARSG guidelines for a detailed description of allowable residency expenses that can be paid for by AHCMC.)
- **Applicants must retain a portion of the budget to compensate themselves for their work.**
- **Use an asterisk (*) to mark expenses that will be paid for by the AHCMC grant.**
- **Do not** include "miscellaneous" or "contingency" expenses.

Line Item	Description	Amount
1. *Artist fee	Applicant's own compensation	\$
2.		\$
3.		\$
4.		\$
5.		\$
6.		\$
7.		\$
8.		\$
9.		\$
10.		\$
Total Cash Expenses		\$ (Will automatically calculate)

*In-Kind Expenses

- If items are donated, i.e., supplies or services, list those items below. In-kind expenses are non-cash expenses.

Line Item	Description	Amount
1.		\$
2.		\$
3.		\$
4.		\$
Total In-Kind Expenses		\$ (Will automatically calculate)

*Cash Income

- **The first line item must be "AHCMC Grant" with the requested grant amount of: Will autofill**
- Include any other sources of income for this project.

Line Item	Description	Amount
1. AHCMC Grant	Amount requesting for Residency 1	\$
2.		\$
3.		\$
4.		\$
5.		\$
6.		\$
7.		\$
8.		\$
9.		\$
10.		\$
Total Cash Income		\$ (Will automatically calculate)

***In-Kind Income**

- If you entered in-kind items in the “In-Kind Expenses” section above, re-enter those same items in the chart below.

Line Item	Description	Amount
1.		\$
2.		\$
3.		\$
4.		\$
Total In-Kind Income		\$ (Will automatically calculate)

Total expenses MUST EQUAL total income, as well as the total project cost entered at the beginning of the application.

- **Total Residency 1 Expenses:** *Will automatically calculate this total*
- **Total Residency 1 Income:** *Will automatically calculate this total*
- **Total Residency 1 Cost:** *Will autofill from applicant’s response on page 3*
- **Total Residency 2 Expenses:** *Will automatically calculate this total*
- **Total Residency 2 Income:** *Will automatically calculate this total*
- **Total Residency 2 Cost:** *Will autofill from applicant’s response on page 4*
- **Total AHCMC Grant Request:** *Will autofill*

Budget Notes

***Provide additional information about how the residency expenses are calculated.** For example, if "Classroom Materials \$1,500" is listed in the budget, provide additional detail about this line item here. (1,500 characters maximum with spaces)

***Provide additional information about how the residency income was calculated and information on income sources beyond the AHCMC grant request, if applicable.** For example, if "Other Grants \$1,500" is listed, provide information about that source of income. (1,500 characters maximum with spaces)

***Describe the in-kind contributions (donated goods, services, or discounts) allocated for the residency.** If not applicable, indicate N/A. (1,500 characters maximum without spaces)

Work Sample(s) Description

This is a separate task from the application narrative.

***Explain what the work sample(s) is (i.e., a performance from 2020) and why the work sample(s) was selected.** Address how the sample(s) relates to the residency and your work as a teaching artist. (1,500 character maximum with spaces)

Required Uploads

All documents except for work samples must be submitted as PDFs. (See the work sample directions below for information about acceptable file formats.) Contact AHCMC grants staff if you need help converting your documents to PDFs.

IMPORTANT! Staff will remove Programming Support Materials and Work Samples that exceed the limits stated below.

A completed application includes:

1. Completed Narrative

2. Artist Profile

- Upload your Artist Profile as shown on the [Maryland State Arts Council's Arts Directory](#).
 - AHCMC's Teaching Artist Roster is permanently closed. Applicants who were previously approved to be on AHCMC's Roster do not have to submit an AHCMC Artist Roster profile.

3. Letter of Commitment

- The letter should state that the school has committed to partnering with the applicant on the residency as described and during the allowable grant period. The letter should be signed by the collaborating classroom teacher.
- **If completing a second residency at a different school, applicants must upload a Letter of Commitment for each participating school.**

4. MCPS Schools at a Glance Page

- The MCPS Schools at a Glance page can be accessed here: <http://www.montgomeryschoolsmd.org/departments/sharedaccountability/glance/>
- If the applicant is collaborating with a non-public school, provide information that is comparable to that found on the MCPS website, including the FARMS rate or programs that serve ESOL or students with disabilities.
- **If completing a second residency at a different school, applicants must upload the Schools at a Glance page for each participating school.**

5. Lesson Plan(s)

- Include lesson plan materials that will be used during the residency (i.e., sample work sheets, evaluation methods, rubrics, etc.)

6. Programming Support Materials

- Include materials that will assist the panel in evaluating the applicant's programming, presenting, and/or producing activities (i.e., newspaper clippings, program booklets,

photos, brochures, flyers, and/or examples of similar previously successful activities).

- **One PDF no more than 5 pages.**

7. Work Sample(s)

- Upload a **maximum of 10 work samples, no more than 10 files or 10 pages total**, that demonstrate the applicant's abilities and achievements as a teaching artist. (The sample(s) should focus on the applicant's own work, not work created by others.)
 - Applicants should submit their strongest work samples – quality work samples are critical to the evaluation of an application.
- Applicants will be provided with a space in the application for a brief description of the work sample(s) and an explanation for how the sample(s) relates to the residency.
- **Work samples may be submitted in any one or combination of the file formats below. Applicants may upload up to 10 files, no more than 10 pages total.**
 - Images: Maximum 10 images, up to 4 MB per file, which can be uploaded individually or formatted as one PDF.
 - Video: Maximum 2 videos, up to 100 MB per file, no more than 5 minutes combined.
 - Audio: Maximum 2 files, up to 10 MB per file, no more than 5 minutes combined.
 - Live video or audio hyperlinks can also be placed within a PDF (i.e., a live hyperlink to YouTube within a PDF).
 - If the submitted video and/or audio is more than 5 minutes combined, applicants will be provided with a space to include instructions for which segments the panel should pay attention to. (Ex: Please click on the YouTube hyperlink to watch the video from 0:47 to 4:10)
 - Written Work:
 - Maximum 10 pages total, double-spaced with at least 11-point font and 1-inch margins.
 - If the work submitted is a portion of a larger work, include a synopsis of the chapters and an outline of the complete work. Clearly explain how and where the piece submitted fits into the whole.
- Applicants are encouraged to submit samples reflecting recently completed work. Samples must adhere to the following guidelines for the discipline of the work in which the applicant is engaged.
 - For Presenting and/or Multidisciplinary: Work sample(s) must convey more than one artistic/scholarly discipline.
 - For Performing Arts: **Applicants are highly encouraged to submit video or audio work samples, instead of stills or photos.**
 - For History or Social Sciences, Historical, Critical, or Theoretical Approaches to the Arts, Linguistics, Literary Analysis, Philosophy, Writing, Ethics or Comparative Religion: Follow the format for written work.
 - For Media, Design, and Visual Arts: Follow the format for video and image files.

AHCMC Reporting Data

The questions below correspond with AHCMC's reporting obligations. Responses to the questions below will not be seen by panelists or factored into the application evaluation and scoring

***Are you a current FY22 AHCMC grantee?**

- Yes
- No

***If yes, do you have data updates that are not reflected in your most recent FY22 application submittal?**

- Yes
- No

Use the links below to answer the following questions about your districts:

- <https://maryland.maps.arcgis.com/apps/webappviewer/index.html?id=177afa87a67746a4ac5496b2d0897fb7>
- <https://www2.montgomerycountymd.gov/mccouncildistrict/>

***Federal House District:**

***State Senate District:**

***State Delegate District:**

***County Council District:**

***Please indicate what race/ethnicity you publicly self-identify as.**

- Asian/Asian American/Pacific Islander
- Arab/Middle Eastern
- Black/African American/African
- Hispanic/Latino/Latina/Latinx
- Native American/American Indian/Indigenous
- White/Caucasian/European
- Multi-Racial or Multi-Ethnic (2 or more races or ethnicities)
- Decline to state

Please indicate which gender you publicly self-identify with. *Two drop-down lists.

- Female
- Male
- Non-binary
- Two-Spirit
- Decline to state
- Transgender
- Non-transgender (cisgender)
- Decline to state

***Please indicate what sexual orientation you publicly self-identify with.**

- Gay, Lesbian, Bisexual
- Heterosexual or Straight
- Asexual
- Decline to state

***Please indicate whether you publicly self-identify as a person with a disability.**

- Yes
- No
- Decline to state