 

The Artists in Education Residency Grant Program is a project of the New Jersey State Council on the Arts and Young Audiences New Jersey & Eastern Pennsylvania. The program is carried out in partnership with regional partners, including Appel Farm Arts & Music Center and Morris Arts.

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| **AIE GRANT APPLICATION INSTRUCTIONS**  **Please review the grant application guidelines carefully before getting started.**  This application is available online at [www.njaie.org](http://www.njaie.org), [www.yanjep.org](http://www.yanjep.org), and [www.artscouncil.nj.gov](http://www.artscouncil.nj.gov).  **Contact us if you are in need of special accommodation in filing this AIE grant application at (609) 984-7019.**  **Special Instructions for Reapplying Schools:**  *Please confer with your AIE Partner when developing a new application*. You should also request an AIE Partner Letter of Consideration, as well as one from your most recent AIE Resident Artist, to include in your application packet. If you plan to work with the same AIE Resident Artist for the proposed residency, please include them in the planning and application process.  **Handwritten, incomplete, or faxed applications will not be accepted.**  A checklist to confirm that your application satisfies the submission requirements can be found at the end of this application. **A complete application packet includes:** | | | | | | |
| □ One digitally-submitted copy, assembled as one complete Word document titled as follows: yourschoolname-AIE-FY20.doc **(Word documents only, please)** emailed to Yolanda.Drislane@sos.nj.gov. Please have the subject line read: Your School Name – AIE FY20Application  □ One (1) original copy with support materials - with original signatures in blue ink  **Emailed and Postmarked by Friday, February 8, 2019**  *Via US Mail (standard or priority mail):*  Yolanda Drislane, AIE Program  c/o New Jersey State Council on the Arts  PO Box 306  Trenton, NJ 08625  *Via Express Ground Shipping (UPS, FedEx, etc.):*  Yolanda Drislane, AIE Program  c/o New Jersey State Council on the Arts  33 West State Street, 4th Floor  Trenton, NJ 08608  **Extension requests** must be received via email to Yolanda.Drislane@sos.nj.gov no later than January 18, 2019. *Only one extension request will be permitted per school.* ***Please note:*** *a request does not guarantee an extension will be permitted.* Applicants are advised to mail applications early. Please retain a copy of your application and the guidelines for future reference. | | | | | | |
| **AIE Residency Grant Application** | | | | | | |
| **PLEASE READ THE AIE PROGRAM GUIDELINES BEFORE COMPLETING THESE FORMS.**  Residencies must be a minimum of 20 days and be part of the regular school day. A residency day is considered to serve approximately four consecutive 45-minute class periods. The core group of students should meet with the Resident Artist during *every* workshop day. *Proposals for less than the minimum residency length will not be considered.*  **First-Time and Reapplying Applicants:** You must submit at least 2 letters of support with this application. One must come from a school administrator who will be involved in the residency.  **First-Time Applicants:** If you have a pre-existing relationship with an AIE Teaching Artist that you intend to work with in your AIE-funded residency, please be sure to include the artist on your Steering Committee. If you have not been working with an AIE-approved artist, you and your AIE Partner will select an AIE artist through interviews after receiving notice of a grant award.  **Previous AIE Grantee Recipients:** If you are continuing to work with an AIE-approved artist from a prior AIE residency, please be sure to include the artist on your steering committee. Previous and current AIE Grantees *must* include Letters of Consideration from their AIE Partner, as well as from the AIE Artist with whom they worked most recently. *Include, too, documentation of past residencies (e.g. newspaper articles, press releases, blogs, student work, photographs, etc). Send no more than 5 pages of supporting materials with your application.*  **APPLICANT INFORMATION**  **Has your school previously received AIE grants? Yes No**  **If yes, list year(s) grants awarded:**  **Proposed participating target grade(s):**        **Proposed total number of students who will meet with the teaching artist *every* residency day (core group):**  **Proposed total number of students participating in residency project activities (participating group – including core group):**  **Proposed total number of adults impacted by the project activities (teachers, parents, etc. participating in daily residency activities and/or professional development; those attending culminating event; etc.):**  **Is this a proposal for a new project or for continued work on an existing project?**  **Please provide a 50 word summary of your grant proposal, including the art form, students and grade levels to be served, and primary residency goals**: | | | | | | |
|  | | |  | | |  |
| Name of School | | | Superintendent/CEO | | | Federal ID Number |
| School District | | | | | | |
| School Street Address | | | | | | |
| City | | | | | | |
| NJ | Zip | County | | | | |
| **Certification:*****By signing below, I certify that I have read and support the residency proposal.*** | | | | | | |
|  | |  | |  | | |
| Principal’s Name | | Principal’s Telephone | | E-Mail (provide one address only) | | |
|  | | | | |  | |
| Authorizing Official’s Signature (Blue ink, please) | | | | | Date (mm/dd/yyyy) | |
| Legislative District:    State    Federal  (*This information is available at* [*http://www.njleg.state.nj.us/members/legsearch.asp*](http://www.njleg.state.nj.us/members/legsearch.asp) *and* [*http://www.house.gov/representatives/find/*](http://www.house.gov/representatives/find/)*.)*   |  |  |  |  | | --- | --- | --- | --- | | APPLICANT STATUS  Which category best describes your organization’s legal status? Please place an X next to appropriate selection. | | APPLICANT INSTITUTIONWhich category best describes your organization? Please place an X next to appropriate selection. | | | Nonprofit Organization  State Government  Regional Government | County Government  Municipal Government  None of the Above | School District  Elementary School  Middle School | Secondary School  Vocational/Technical School  School/Other: | | | | | | | |
| DISCIPLINE: *Choose the* ***ONE discipline*** *which best describes the desired residency or project, and enter the appropriate code numbers and letter prefix (if applicable) for which you are applying.*  ***Please note: For the 2019-2020 school year, preference will be given to applications which focus on performing arts.*** | | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | **(01) Dance** | **(03) Opera/Music Theatre** | **(07) Crafts** | **(10) Creative Writing** | | A. Ballet  B. Ethnic/Jazz  C. Modern  **(02) Music**  A. Band (does not include jazz or popular)  B. Chamber (includes only one musician/part)  C. Choral  D. New (includes experimental & electronic)  E. Ethnic (includes folk- inspired)  F. Jazz  G. Popular  H. Solo/Recital  I. Orchestral (includes symphonic & chamber orchestral) | **(04) Theatre**  **(05) Visual Arts**  A. Experimental (includes conceptual, installations, new media, new approaches)  B. Graphic (includes printmaking, book arts, drawing, does not include graphic design)  D. Painting (includes oil, acrylic, watercolor)  F. Sculpture  **(06) Design Arts**  A. Architecture  B. Fashion  C. Graphic/Illustration  D. Industrial  E. Interior  F. Landscape Architecture  G. Urban Design/Planning | A. Clay  B. Fiber  C. Glass  D. Leather  E. Metal  F. Paper  G. Plastic  H. Wood  I. Mixed Media  **(08) Photography**  **(09) Media Art**  A. Film  B. Audio(includes radio, sound)  C. Video | A. Prose  B. Playwriting  C. Poetry  **(11) Interdisciplinary\***  Pertaining to art forms/art works that integrate more than one arts discipline to form a single work (e.g., collaboration between/ among the performing and/or visual arts) as well as performance art.  **(12) Folk Arts\***  ***\*Schools interested in applying for these residencies must first consult with AIE staff at 609-984-7019.*** | | | | | | | |
| **Steering Committee/ Residency Support Structure**: Refer to the Glossary in guidelines (pages 15-16) for definitions.  **List the Grant Contact:** Please provide the name, phone number, and email address of the contact person for questions regarding this grant proposal.  Name:       Title/Position:       Phone number:       Email address:  **List the members of the Steering Committee:**  On-Site Coordinator:       Title/Position:       Email address:  Administrative Coordinator:       Title/Position:       Email address:  Teacher Liaison (if applicable):       Title/Position:       Email address:  Teaching Staff (Please include grade level and subject area or current title, specifying those who will have a direct role in the residency):  Community Members (Please include affiliations: i.e. parent, business person, Teaching Artist, etc.): | | | | | | |
| How did you hear about the AIE Grant?  An AIE School  From my Administrator  AIE Staff (please specify)        Teaching Artist  Technical Assistance Workshop  Direct Mail  Email  Other (please specify)  **AIE Orientation Meeting:** Please choose one of the dates below that your On-Site Coordinator and Administrative Coordinator will participate in an AIE Orientation meeting with the AIE staff.Refer to the Glossary in guidelines (page 16) for more details.  Thursday, July 25, 2019 at Young Audiences NJ & Eastern PA (Princeton, NJ)  Thursday, August 15, 2019 at Young Audiences NJ & Eastern PA (Princeton, NJ) | | | | | | |
| **Residency Grant Narrative**  **INSTRUCTIONS FOR FILLING OUT FIELDS BELOW:** Fields are set with word limits and will end when the limit is reached. As you type, the field will expand to accommodate your entry and push subsequent content down. This will automatically increase the amount of document pages that you will submit and document length will vary for each user.  **1. Please describe the proposed residency and how it will augment the existing arts curricula at your schools’ site. Why was this art form selected?** (750 word limit)    **2. What long-term impact does your school hope to achieve through this residency?**    **3. Please describe what students will learn from this residency. List no more than 5 student outcomes you anticipate from this residency. *Please be succinct and realistic* in your anticipated outcomes.**   * Students will * Students will * Students will * Students will * Students will   **4. Please describe what teachers will learn from this residency. List no more than 3-5 teacher outcomes you anticipate from this residency. *Please be succinct and realistic* in your anticipated outcomes.**   * Teachers will * Teachers will * Teachers will * Teachers will * Teachers will   **5.** **Describe the artistic processes that students and teachers will engage in to meet the outcomes stated in questions 3 and 4.** (500 word limit)    **6. Does your school/district have a strategic plan or set of adopted goals that includes the arts? If yes, please describe and highlight any ways that AIE might help your school achieve these goals.** | | | | | | |
| **7.Number of Core groups:**       **Number of students in each Core group:**  *(Please refer to Core Group definition in glossary. This figure should match the figure listed on page 2.)*  **Briefly describe the criteria for selecting the core and participating groups.** (500 word limit).    **8. How do you plan to document and evaluate the outcomes of the student and teacher goals described in questions 3 and 4? (i.e.: photos, video, student journals, social media, etc.)** (500 word limit) | | | | | | |
| **9. Please provide the following demographic information:**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | # Courses | # Full-Time Staff | # Part-Time Staff | Comments | | Creative Writing: |  |  |  |  | | Dance: |  |  |  |  | | Media Arts: |  |  |  |  | | Music: |  |  |  |  | | Theatre: |  |  |  |  | | Visual Arts: |  |  |  |  | | Other: |  |  |  |  | | | | | | | |
| **Site and Community**  **10. Briefly describe your school and community including geographic and socio-economic characteristics.**    **11. Please describe any existing or planned partnerships with community or cultural organizations, highlighting those that may play a role in your proposed residency.**    **Support/Scheduling**  **12. Please describe how you anticipate scheduling student workshops (with focus on aligning scheduling for the core student groups). Be sure to provide the projected number of times per week, length of sessions, and the general time of year for the proposed residency. (See Residency Components and Sample Timeline on pages 7-10 of the guidelines. *Please remember that 4 of the 20 residency days include the planning meeting, professional development day, culminating event, and reflection day*.)**    **13. Please describe how you anticipate scheduling planning meetings with your Steering Committee, AIE Resident Artist, and AIE Partner.** | | | | | | |
| **Support/Facility**  **14. Please describe the artist’s work space in your school, with particular consideration for the specific needs of the artistic disciplines involved. Describe the facilities/equipment available for the artist’s use.** (300 word limit) | | | | | | |
| ***(Reapplying Grant Recipients Only)***  **15. Is your school currently, during the 2018-2019 school year, participating in an AIE residency?**  **Yes No**  **16. If yes, in what stage is your residency (planning stage, residency has started, PD for teachers has taken place, etc.) and can you describe your experience thus far?**  (500 word limit)      **17. If no, briefly summarize what took place in past AIE residencies, and describe if/how the proposed residency relates to past residencies. Reminder: Please provide no more than 5 pages of documentation from past residencies.** (500 word limit)    **18. Describe how previous and proposed residencies and professional development activities will help to create sustainability for the arts in your school.** (500 word limit) | | | | | | |
| ***Reminder: Current and previous AIE Grantees reapplying for funding should include Letters of Consideration from their AIE Partner as well as from the most recent AIE Artist with whom they worked.*** | | | | | | |

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| **Proposed AIE Residency Grant Budget** | | |
| **School Match Item**  The list below contains a variety of items schools have paid for to support their AIE residency. Please decide which items your school will need in order to meet the requirements of your proposed residency. ***School must fund either a visiting artist, assembly, or field trip.*** | **Amount**  The total amount matched by the school should be at least $2,000, which is 1/3 the amount AIE pays for the Resident Artist fees for a 20 day residency. | **Income Source**  Please list how the school will secure the funds needed (i.e.: fundraising, existing budget, in-kind donation, etc.).  ***In-kind donations should not comprise more than 50% of your match.*** |
| Teacher Release Time | $ |  |
| Substitute Teacher Fees | $ |  |
| Materials / Supplies | $ |  |
| Equipment | $ |  |
| Field trip | $ |  |
| Visiting Artist(s) / Assembly Program | $ |  |
| Artist Tools Rental Fee | $ |  |
| Extra Residency Days (Teaching Artist Fee of $300 X \_\_\_\_ days) | $ |  |
| Extra Travel for Artist ($0.535 per mile X roundtrip miles) |  |  |
| Administrative Costs | $ |  |
| Documentation / Evaluation / Publicity | $ |  |
| Other: | $ |  |
| Other: | $ |  |
| Other: | $ |  |
| **Total** | **$** |  |
| ***For budget-related questions, consult the definitions in the guidelines (pages 17-18),***  ***or call AIE at 609-984-7019.*** | | |
| **BUDGET NARRATIVE**  **Please provide a brief explanation of your school’s match, and how you arrived at the items you listed as necessary to support your residency.**    **End of 2019-2020 AIE Residency Grant Application** | | |

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| **FINAL CHECKLIST**  Please use this checklist to indicate the items submitted and ensure that  your application packet includes all the required materials.  Only complete applications will be considered.  **School Name:**  APPLICATION CHECKLIST |
| |  |  |  | | --- | --- | --- | | **Completed application form, including:** | | | | Applicant Information | 1 Original  1 Email |  | | Certification *(Email copy can be without signatures)* | 1 Original  1 Email |  | | Residency Grant Narrative | 1 Original  1 Email |  | | Budget | 1 Original  1 Email |  | | **Required Documents – to be mailed with signed original** | | | | Two (2) Letters of Support  (*One from a school administrator, who will be involved in residency)* | 1 Original |  | | Documentation from Past Residencies  *(Reapplying schools ONLY)* | 1 Original |  | | Letter of Consideration from AIE Partner  *(Reapplying schools ONLY)* | 1 Original |  | | Letter of Consideration from Most Recent AIE Artist  *(Reapplying schools ONLY)* | 1 Original |  | |
| Thank you for your application.  Please keep an additional copy for your records.  **Awards will be announced in late May 2019.** |