

**Creative Communities
Final Report – FY09**

Completion of this form is required under Wisconsin Arts Board policy. Failure to comply will result in non-eligibility for future grants through this agency. Please type all responses.



This final report is for (check one):

Arts Education

Folk and Traditional Arts

Local Arts

Grant Number: FY09- _____

Grant Amount Awarded: _____

Grant Amount Returned (if any): _____

Grant Amount Spent: _____

Date Returned: _____

Section A: Grantee Summary

Legal Name of Organization: _____

Mailing Address: _____

City: _____	State: WI	Zip: _____
Daytime Phone: () _____	Fax Number: () _____	
Org. Email: _____	Web URL: _____	
Contact Name: _____	Contact Title: _____	
Contact Phone: () _____	Contact Email: _____	

Section B: Grant Activity Summary

Start Date Day: _____ Month: _____ Year: _____
 End Date Day: _____ Month: _____ Year: _____

Funded activities must have taken place between July 1, 2008 and June 30, 2009.

Total number of artists who were directly involved in providing artistic services: _____

Total number of people who benefited directly from the project: _____
 (Include audience, participants, students, etc. Estimate for broadcasts or large public events. Do not include employees of paid performers.)

Total children and youth that benefited from the project activities: _____
 (This number should reflect a portion of the total people who benefited.)

Section C: Budget Summary

DO NOT TYPE IN THIS SECTION! It will fill in automatically after you complete Section D and Section E.

Total Income: _____ Surplus/Deficit _____
 Total Expenses: _____ Total In-Kind _____

Section D: Project Budget Income

Include only those costs related to the funded activities. Please itemize and round off all figures to the nearest dollar.

Admissions		
		Subtotal:
Contracted Services		
		Subtotal:
Corporate Contributions		
		Subtotal:
Foundation Support		
		Subtotal:
Other Private Support		
		Subtotal:

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Government Support - Federal		
		Subtotal:
Government Support – State/Regional		
		Subtotal:
Government Support - Local		
		Subtotal:
Other Revenue		
		Subtotal:
Applicant Cash		
		Subtotal:

Section E: Project Budget Expenses

Include only those costs related to the funded activities. Please itemize and round off all figures to the nearest dollar.

Personnel - Administrative		
		Subtotal:
Personnel - Artistic		
		Subtotal:
Personnel - Technical/Production		
		Subtotal:
Outside Artistic Fees & Services		
		Subtotal:
Space Rental		
		Subtotal:

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Travel		
		Subtotal:
Marketing		
		Subtotal:
Remaining Operating Expenses		
		Subtotal:
Capital Expenditures		
		Subtotal:
In-Kind		
		Subtotal:

Section F: Project Budget Summary - Income

DO NOT TYPE IN THIS SECTION! It will fill in automatically after you complete Section D and Section E.

Admissions		
Contracted Services		
Corporate Contributions		
Foundation Support		
Other Private Support		
Government Support – Federal		
Government Support – State/Regional		
Government Support – Local		
Other Revenue		
Applicant Cash		
Grant Amount Spent		
Total Cash Income		
In-Kind		
PROJECT BUDGET		

Section G: Project Budget Summary - Expenses

DO NOT TYPE IN THIS SECTION! It will fill in automatically after you complete Section D and Section E.

Personnel - Administrative		
Personnel - Artistic		
Personnel - Technical/Production		
Outside Artistic Fees & Services		
Space Rental		
Travel		
Marketing		
Remaining Operating Expenses		
Capital Expenditures		
Total Cash Expenses		
In-Kind		
PROJECT BUDGET		

Section H: Narrative Continued

4. One focus of the Creative Communities Program is community involvement. How was the community involved in a) the planning, b) the evaluation, and c) the artistic activities of the project? (Schools, include partners both in and outside of the school.) Examples of participation strategies include creative marketing/ communication strategies, pre- or post- performance lectures/discussion, programming in non-traditional venues such as churches, taverns, libraries, etc.

5. Answer one of the following:

Arts Education grant recipients: Specify how this particular grant provided opportunities for quality arts experiences for K-12 students. How did it involve students and teachers in the exploration of the creative process of a particular art form?

Folk Arts grant recipients: Specify how this particular grant enhanced the appreciation of and ensured the continued vitality of the folk and traditional arts of Wisconsin. How did it identify, assist, and/or honor traditional artists?

Local Arts grant recipients: Specify how this particular grant supported the creation and development of the arts at the local level.

Section I: Support Materials

Required

Printed material from the project with Wisconsin Arts Board and National Endowment for the Arts logo/credit line – no more than three

Three high quality digital images from the project on a CD (no Power Point files, please) with a) a brief description of the subject matter and b) the photographer’s name. By submitting these images, you give permission to the Wisconsin Arts Board to use those images in our online annual report.

Copies of letters (or emails that include the “date sent” line) to your legislators and Governor acknowledging them and thanking them for this grant, as required on p.4 of the Creative Communities Grant Program application guidelines.

If applicable, a copy of the letters sent to Wisconsin’s U.S. Senators and your organization’s U.S. Congressperson.

Copies of invitations (including emails that include the “date sent” line) to your legislators and Governor, as required on p.4 of the Creative Communities Grant Program application guidelines.

Additional Materials Accepted

Press clipping(s) – we are particularly interested in human interest stories associated with your project.

Documentation of artistic product (such as a book, film, video, digital images, literary magazine) only if the funding was applied specifically to a single artistic product.

Section J: Authorizing Signature

I certify that this final narrative and support materials are true and correct to the best of my knowledge and belief.

Signature of Authorizing Official _____ Date _____

Type Name _____ Title _____

Retain a copy of this report for your records and mail the original and support materials to:

Wisconsin Arts Board
First Floor
101 E. Wilson Street
Madison, WI 53702

Deadline: Postmarked by July 31, 2009

Wisconsin Arts Board Satisfaction Survey

1. In general, my organization receives a high level of service from the Wisconsin Arts Board.

Strongly Agree

Agree

No Opinion

Disagree

Strongly Disagree

Comment:

2. In general, the Wisconsin Arts Board staff members have provided my organization with good customer service throughout the most recent application and grant review process.

Strongly Agree

Agree

No Opinion

Disagree

Strongly Disagree

Comment:

3. Wisconsin Arts Board technical support staff was available by phone or email as needed and responded to my organization's requests for assistance in a timely fashion.

Strongly Agree

Agree

No Opinion

Disagree

Strongly Disagree

Comment:

4. The peer review process at the panel meeting was informative, educational, and worthwhile.

Strongly Agree

Agree

No Opinion

Disagree

Strongly Disagree

Comment:

5. Panelists' comments and constructive criticisms will be helpful to my organization the next time we apply to the Wisconsin Arts Board.

Strongly Agree

Agree

No Opinion

Disagree

Strongly Disagree

Comment:

6. If no one from your organization attended the panel review for this grant, or listened to the podcast provided on our website following the panel meeting, please tell us why:

7. Please use the space below to describe ways in which the Wisconsin Arts Board could improve its services, or discuss technical assistance or training opportunities that would be beneficial to your organization and/or the field.

Thank you for your time and thoughtful responses.

Please return this Satisfaction Survey form to:

**Wisconsin Arts Board
1st Floor, 101 E. Wilson Street
Madison, WI 53702**

OR

artsboard@wisconsin.gov