

Writers' League of Texas
1501 West Fifth Street, Suite E-2
Austin, Texas 78703 512-499-8914

OFFICE USE ONLY:

Date application received _____

Checked for completeness _____

Pending _____ Ready for panel _____

2004-2005 Literature Grants

Administered by the Writers' League of Texas for the Texas Commission on the Arts

Application Form

Deadline: Hand-delivered applications are due at the Writers' League of Texas by 6 p.m. December 10, 2003. Applications that are mailed must bear a December 10, 2003 postmark. No fax applications will be accepted.

Applications must be typed. Handwritten applications will not be accepted. Do not staple application; use paper clips only. *Five (5) copies and the original application form must be included [total of six (6)]. Two (2) copies of other attachments are required.*

Operating Grants are for **organizations only**. A 1:1 match is required for organizations with budgets less than \$1,000,000. A 2:1 match is required of organizations with budgets of more than \$1,000,000. Organizations may request up to \$4,000. No individuals, universities, or university departments may apply. Organizations must be a 501(c)(3) or be under the umbrella of a 501(c)(3) organization.

Part I: Applicant Information

Organization Name _____

Federal Employer's ID # (state if organization's or umbrella organization's, per tax-exempt IRS status) _____

Umbrella Organization, if applicable _____

Applicant's Information:

Mailing address _____

City	State	Zip	TX County
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Street Address _____

City	State	Zip	TX County
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Telephone # (____) _____ Fax no. (____) _____ e-mail _____

Contact person: _____ Phone # (____) _____

(Who can answer questions about this request?)

Contact person's title: _____

Part II: Proposal Information

The Writers' League of Texas grant year begins June 1, 2004, and ends May 31, 2005.

What is the organization's fiscal year? From (MM/DD/YY) _____ to (MM/DD/YY) _____

Number of persons to be served from this proposal _____
(Estimate total audience: students, participants and others; exclude broadcast audience, artists and employees)

If any events are to be carried on television or radio, estimate how many people they will reach _____

Population of service area _____
(Be accurate! Include your community, city, surrounding counties, or area, which will be served by this program)

Part III: Narrative

Type a concise description of the operational support for which funds are being requested, using a typeface no smaller than 10 pt. or equivalent. Feel free to cut and paste here if necessary. Additional pages will not be accepted. *(400 words or less)*

The _____ requests \$ _____ for
(Name of or organization) (Dollar amount)

How will the organization and its activities relate to the review criteria?

Service: *(50 words or less)*

Capability: *(50 words or less)*

Involvement: *(50 words or less)*

Artistic Merit: *(50 words or less)*

Part IV: Proposal Financial Information

1. CASH RESOURCES, KNOWN AND ANTICIPATED
(Round figures to the nearest dollar)

a. Earned Income

Admissions, subscriptions	\$ _____
Concessions, sales, mailing list rental, advertisers, etc.	\$ _____
Tuition, workshop fees	\$ _____
Interest income	\$ _____
Other <i>(list)</i> _____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL EARNED INCOME \$ _____ **(1a)**

b. Unearned Income

Fundraising/Benefits	\$ _____
Contributions/sponsors	\$ _____
Memberships	\$ _____

Government Support

Local government	\$ _____
Hotel/Motel Tax	\$ _____
Other <i>(describe)</i> _____	\$ _____
_____	\$ _____
_____	\$ _____
County/Regional	\$ _____
State <i>(other state & TCA grants that support this proposal; Do not include amount requested in this application)</i>	\$ _____
Federal	\$ _____
__NEA __NEH __IMA __other _____	\$ _____

Private Support

Corporate	\$ _____
Private Foundations	\$ _____
Restricted funds <i>(describe)</i> _____	\$ _____
_____	\$ _____
Other <i>(describe)</i> _____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL UNEARNED INCOME \$ _____ **(1b)**

c. CASH FROM PRIOR YEAR applied to this project \$ _____ **(1c)**

2. TOTAL CASH RESOURCES *(Total of 1a, 1b, and 1c)* \$ _____

3. Writers' League of Texas REQUEST \$ _____

4. TOTAL REVENUES *(Total of 2 and 3)* \$ _____

5. IN-KIND SUMMARY *(List)* _____

 \$ _____

6. TOTAL PROPOSAL RESOURCES *(Total of 4 and 5)* \$ _____
(Total must match total expenditures on next page)

7. PROPOSAL EXPENDITURES

<i>Total your numbers across & down!</i>	WLT Request	Applicant Cash	In-Kind	Total (add across)
a. Permanent staff salaries & wages	_____	_____	_____	_____
artistic	_____	_____	_____	_____
administrative	_____	_____	_____	_____
technical	_____	_____	_____	_____
b. Fringe benefits	_____	_____	_____	_____
c. Fees for outside professional services	_____	_____	_____	_____
artistic	_____	_____	_____	_____
administrative	_____	_____	_____	_____
technical, other	_____	_____	_____	_____
d. Space rental	_____	_____	_____	_____
e. Travel and transportation	_____	_____	_____	_____
f. Miscellaneous operating expenses	_____	_____	_____	_____
equipment rental	_____	_____	_____	_____
shipping & postage	_____	_____	_____	_____
supplies and materials	_____	_____	_____	_____
marketing and promotion	_____	_____	_____	_____
printing	_____	_____	_____	_____
insurance	_____	_____	_____	_____
g. Other expenses	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Totals	\$ _____ <i>same as #3 pg. 3</i>	\$ _____ <i>same as #2 pg. 3</i>	\$ _____ <i>same as #5 pg. 3</i>	\$ _____ <i>same as #6 pg. 3</i>

APPLICANT ORGANIZATION FINANCIAL INFORMATION

Use figures for entire operations. Supplemental financial attachments must match these figures.

Date of organization's fiscal year: _____ through _____
Month Day Month Day

	Total income	Total expenditures
Previous Fiscal Year Actual Figures	\$ _____	\$ _____
Current Fiscal Year Approved Budget	\$ _____	\$ _____
Upcoming Fiscal Year Projected Budget	\$ _____	\$ _____

Part V: Legislative Information

List the district number and name of your elected officials. The dollars for these grants come directly from the Texas Legislature, and it is important for Writers' League to make reports back to these elected officials. *(This information is available via the Internet at <http://www.house.state.tx.us/> under the Membership Area.)*

U.S. Congress	Dist. No. _____	Name _____
TX House of Representatives	Dist. No. _____	Name _____
TX Senate	Dist. No. _____	Name _____

Part VI: Compliance with Equity Mandate

The goal of the Writers' League of Texas and Texas Commission on the Arts is to ensure arts opportunities to all Texans. Every effort is made to sustain and improve services and accessibility to culturally diverse populations, geographically isolated and rural communities, individuals with disabilities, and economically disadvantaged communities. Grantees of the Commission, including the Writers' League of Texas, are required to comply with the Equity Mandate as part of their contractual relationship with the Commission and is part of their service to the citizens of Texas.

Part VII: Ethnicity Information

1. What is the approximate ethnic breakdown of the individuals to be served by this organization? *(Total must equal 100%)*

American Indian/Alaskan Native	_____ %
Asian/Pacific Islander	_____ %
Black (not Hispanic)	_____ %
Hispanic	_____ %
White (not Hispanic)	_____ %
Multi-Racial	_____ %
<hr/>	
TOTAL	100%

2. List the number of individuals from the applicant organization's board and staff in the following categories:

	Staff or Project Personnel	Board
American Indian/Alaskan Native	# _____	# _____
Asian/Pacific Islander	# _____	# _____
Black (not Hispanic)	# _____	# _____
Hispanic	# _____	# _____
White (not Hispanic)	# _____	# _____
Multi-Racial	# _____	# _____

Part VIII: Assurances

If financial assistance is awarded the applicant hereby gives assurance to the Writers' League of Texas and TCA that:

- Any funds received as a result of this application will be used solely by the organization described.
- The applicant will comply with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Education Amendments of 1972, the Americans with Disabilities Act of 1990, the Drug Free Workplace Act of 1988, and Section 10(7)(B) of the Commission's Enabling Legislation.
- The applicant is a non-profit entity as defined by the IRS.
- The undersigned has been duly authorized by the applying organization to submit this application.

I certify that all information contained in this application, including all attachments and supporting materials, is true and correct to the best of my knowledge.

Signature of Authorizing Official *(for organization)*

Date

Typed Name

Title within organization

(____) _____
Business Phone

(____) _____
Home Phone

ATTACHMENT CHECKLIST

Name of Applicant Organization

DO NOT STAPLE APPLICATION FORM OR ATTACHMENT MATERIAL TOGETHER.

Please submit attachments **in this order**.

ORGANIZATIONS with 501 (c) (3) status

___ Completed signed original application form **and five (5) copies** of the application form *[total of six (6)]*.

Two (2) copies of each of the following attachments:

___ IRS letter of determination

___ Current detailed Operational Budget

___ Financial statements or independent audit *(for most recently completed year)*

___ Organizational History *(one page)*

___ Current Board of Directors

___ Résumés of key personnel *(one page per person maximum)*

___ List of literary activity, publications, presentations, programs produced in the past year

___ List of upcoming literary activity, scheduled publications, presentations, programs, productions, etc.

___ Support materials: publications, publicity, reviews, letters of support, promotional material, photos, etc.

ORGANIZATIONS WITHOUT 501(c)(3) STATUS applying under an umbrella organization with 501(c)(3) status.

___ Completed signed application form **and five (5) copies** of the application form *[total of six (6)]*.

Two (2) copies of each of the following attachments:

___ IRS letter of determination from umbrella organization

___ Current detailed Operational Budget for applicant

___ Financial statements or independent audit for umbrella organization *(for most recently completed year)*

___ Financial statements or independent audit for applicant organization *(for most recently completed year)*

___ Organizational History of umbrella organization *(one page)*

___ Organizational History of applicant organization *(one page)*

___ Current Board of Directors *(if not available, use umbrella's Board of Directors)*

___ Résumés of key personnel *(one page per person maximum)*

___ List of literary activity, publications, presentations, programs, productions, etc., produced in the past year

___ List of upcoming literary activity, publications, presentations, programs, productions, etc.

___ Support materials: publications, publicity, reviews, letters of support, promotional material, photos, etc.

___ Letter of agreement with the umbrella organization