



Syracuse Cultural Festivals Fund Grant Application



Application Date _____

(Note: funding application must be submitted at least 2 months prior to event/program start date.)

Grant Amount Requested

THIS SECTION FOR DSF USE ONLY

RECEIVED

GRANT AMOUNT APPROVED

CHECK MAILED

CHECK #

AUTHORIZED BY

Name of Applying Organization (Note: To be eligible for funding, the organization must be a 501(c)(3) or 501(c)(4) certified not-for-profit entity or demonstrate an existing working relationship with an established not-for-profit fiscal agent)

If approved, grant check would be made payable to _____

Applying Organization's Federal Tax ID# _____

How many years has your organization been in operation? _____

Contact _____ Title _____

Mailing Address _____

Telephone _____ Mobile # _____

E-Mail _____ Website _____

PROJECT

Name of Event _____

Date(s) of Event _____

Location(s) of Event _____

Description of Event

Is this a new or an existing event? New Existing

If existing, how many years has your organization held this event? _____ Date of most recent event _____

Please provide an estimate of expected attendance: _____

What data or information are you using to calculate that attendance estimate?

Eligible events will attract visitors to public spaces, should increase the community's awareness of a variety of ethnicities, build appreciation for a diversity of cultures, traditions and art forms, create opportunities to celebrate the diverse fabric of our region and showcase the artistic opportunities found within our city.

How will your event accomplish these goals? (complete below or attach an explanation)

Festivals that receive support will be able to demonstrate the organizer's track-record for event growth, or that there is a plan for future growth of the event.

How does your festival address this component? (complete below or attach an explanation)

How will your organization market this event to attract a wide and diverse audience?

PROJECT EXPENSES

Funds may be used to cover direct costs such as: booking and supplying performers, artists, staging, tenting, lighting, audio/visual needs, permitting and venue related fees and marketing to attract and draw patrons.

Total Project Expenses Anticipated \$ _____

The Festival Fund Grant would be used to pay for: *(complete below or attach budget)*

A _____	Amount \$ _____
B _____	Amount \$ _____
C _____	Amount \$ _____

PROJECT FUNDING

Total Project Funding Secured to Date \$ _____

Other sources of funding for this event, not including this grant, are: *(complete below or attach budget)*

Source A _____	Amount \$ _____
Source B _____	Amount \$ _____
Source C _____	Amount \$ _____

Individual authorized to submit grant application:

_____ Title _____
Print Name

_____ Date _____
Signature

- 1) Please attach a copy of your organization's Federal 501 (c) (3) or 501 (c) (4) certificate or the fiscal agent's certification.
- 2) Mail or email signed application to:

Laurie Reed, Downtown Syracuse Foundation
115 West Fayette Street
Syracuse, NY 13202
Email: LReed@DowntownSyracuse.com
Telephone: (315) 422-8284