

Iowa Community Cultural Grant

(Rev 1/2009)

Application Instructions:

The ICCG application form requires that you use Adobe Acrobat Reader 7.0 or higher. This will allow you to fill in the form and save it with your changes after you have downloaded it to your computer. Download time for the form may be long depending on your internet connection.

Download Adobe Acrobat Reader [here](#).

Before completing the application form, please read these instructions. Print this page for reference before going to the application form.

Step 1) Complete the ICCG Application Form:

A. Applicant Section

Be certain to provide all requested information.

B. Fiscal Agent Section

If you are using a fiscal agent, provide all requested information.

C. Project Information Section

Make sure to answer all questions.

D. Project Budget Section

Expenses:

List all expenses associated with the proposed project. Indicate which expenses are to be met by the Iowa Community Cultural Grant, cash match, and in-kind match. See the [Match Requirements](#) for definitions and requirements of matching funds.

Income Sources:

List all anticipated sources of income and the amount expected. Do not list funds from Iowa Arts Council, Department of Cultural Affairs, and State Historical Society of Iowa grants; they are not allowable matches. Indicate what kind of income/revenue each source is according to the following:

Cash Match - Income Earned by Project (not required): This is income to be derived from the project, if any. For example: ticket sales, product sales.

Cash Match - Cash Contribution: This includes any cash contributions from the applicant or from an outside source, specifically to pay for the expenses of this project. For instance, other grants for which you have applied or which you have received for the project, or specific budget allocations from your organizations.

In-Kind Contribution: This includes donations of goods and/or services to the project to cover expenses of the project.

Total Project Income must match the Total Project Expenses (see Expenses Section).

Check For Budget Errors:

After completing your budget, click on the "Check For Budget Errors" button to check for compliance with request and matching requirements. If no errors are detected, you will see a green message stating "No errors found." If errors are detected, they will be listed in red below the button. The automated budget checking cannot check for omitted information, so be sure to proofread the section.

E. Timeline

Use the timeline form provided in the application or create your own format. You must submit a timeline with your application. The timeline is considered in your "Planning for Proposed Project" score.

F. Narrative Section

Each application is scored based on how well it clearly addresses the following narrative questions.

There are 70 points possible; responses to each section are worth up to 10 points. Follow the instructions and respond to the questions listed in the application. The application form ensures that applicants stay within the indicated word/character limits.

Project Description (up to 250 words)

Describe the main goals and objectives of your project and discuss any details not addressed by specific review criteria.

Note: No points are given specifically for this section, but information may contribute to panelists' understanding of the other sections.

1. **Historical, Ethnic, Cultural and Tourism Value and Quality of the Proposed Project** (up to 150 words) How will your project develop Iowa's cultural, arts, and/or historic resources for the benefit of the public?

Note: no one project is expected to fulfill more than one of these measures.

2. **Planning for Proposed Project:** (up to 100 words) Explain how your project will proceed. Specify who will do what, where, when, and how.

Note: Reviewers will also consider the details included in your required project timeline (Part E) in scoring the Project Planning criterion.

3. **Budget Explanation** (up to 150 words)

Describe specifically how you will use ICCG funds—for what position(s) and what duties/activities?

Note: This explanation, together with required ICCG budget form will be considered for scoring the Budget criterion.

4. **Number and Impact of Full- or Part-time Jobs the Project Creates for Iowans** (up to 150 words)

Describe the number, type and impact of full- or part-time jobs that this project would create for lowans.

5. Collaboration and Partnerships with other Interested Entities (up to 200 words)

Describe all partnerships and primary participants and their roles in the project. Explain how the community will be involved.

Note: Letters from collaborating partners and community organizations are required and will also be considered for scoring the Collaboration and Partnerships criterion.

6. Financial Need of the Applicant for the Proposed Project (up to 100 words)

Describe how and why ICCG grant funding is necessary for this project.

7. Evaluation and Follow-up Activities (up to 150 words)

Consider what will make your project successful and how you will measure the project's success in meeting its goals. Make sure to describe those groups/individuals who will be part of the evaluation process and why. Describe any follow-up activities that will occur after the ending date of the project. Planning, focus groups, mistakes and what was learned from them as well as more formal evaluation methods are all considered to be a part of the evaluation process.

NOTE: Reviewers will also consider the applicant's required evaluation form and/or evaluation criteria to score the Evaluation criterion. If your proposed project was funded previously by ICCG, an evaluation summary and/or description of results should also be included as a separate attachment, which reviewers will consider in their Evaluation score.

G. Service Contract

If your application is funded, this Service Contract will be signed by the Department of Cultural Affairs' executive director and, together with the grant award letter, will be the legal binding agreement between the DCA and your organization as the grantee. The stipulations of the Service Contract are not in effect until a grant is awarded and the contract is fully signed.

Most fields on the Service Contract will automatically fill in after you complete section A of the application (Section B if you are applying using a Fiscal Agent). On the last page of the Service Contract, type in the name of the Authorizing Official who will be signing the contract. After printing the application, the Authorizing Official needs to sign the contract in blue ink on the appropriate signature line. **NOTE: For Applicant's using a Fiscal Agent, this signature needs to be of an Authorizing Official of the Fiscal Agent, not the Applicant.**

H. Substitute W-9

The Substitute W-9 Form provides the DCA's accounting department with necessary information to process a grant award check should your application be approved for funding.

Nonprofit Organizations: Complete BOX B (the right side of the form). Check "Yes" for Corporation. Do not fill in the "Doing Business As" field unless you are using a pseudonym. Fill in all the other fields in BOX B appropriately.

Public Entities: Complete BOX B (the right side of the form). Check "Yes" for Government. Do not fill in the "Doing Business As" field unless you are using a pseudonym. Fill in all the other fields in BOX B appropriately.

Organizations applying with a Fiscal Agent: Complete BOX B (the right side of the form). Fill-in the FISCAL AGENT'S information, not the applicant's information, as any grant check will be issued to the Fiscal Agent. Check "Yes" for Corporation. Do not fill in the "Doing Business As" field unless you are using a pseudonym. Fill in all the other fields in BOX B appropriately.

Signature and Date: After printing the form, obtain the signature of the Authorizing Official indicated on the Service Contract, and date the form.

I. Minority Impact Statement

The Minority Impact Statement is a new requirement for all grant applications submitted to state agencies beginning in 2009.

Check the box next to the statement regarding the impact that the proposed grant program will have on minorities.

If the project proposed in your grant application could have a disproportionate or unique *positive* impact on a minority group:

- Check the first check box.
- Briefly describe the positive impact.
- Check the boxes next to the minority groups your project could positively impact.

If the project proposed in your grant application could have a disproportionate or unique *negative* impact on a minority group:

- Check the second main box.
- Briefly describe the negative impact.
- Briefly provide the rationale for the project.
- Provide evidence that you have consulted with representatives of the minority groups impacted.

If the project proposed in your grant application would not have a disproportionate or unique impact on a minority group:

- Check the third main box.
- Briefly provide the rationale for determining that this project had no disproportionate or unique impact on a minority group.

At the bottom of the form, the Name field should be filled with the Name of the Contact person for the Applicant listed on the grant application. The title field should be filled with that person's title.

Please collate your application in the following order (all items listed below are required unless otherwise noted):

- One (1) Completed ICCG application form, including:
 - Parts A-F
 - Part G: Signed Service Contract (sign in [blue ink](#))
 - Part H: Completed and Signed Substitute W-9
 - Part I: Minority Impact Statement
- Support letters from collaborating partners and/or beneficiaries (minimum 3, maximum 5)
- Evaluation form and/or evaluation criteria and process
- Evaluation summary or evaluation results (Required only for repeated or continuation projects)
- Documentation of applicant's 501(c)(3) federal tax-exempt status (IRS). NOT required for applicant cities, counties and tribal councils. See below if applying with a fiscal agent.

- Documentation of applicant's Iowa non-profit status (Iowa Secretary of State). See below if applying with a fiscal agent.

Additional Requirements for Applicants Using a Fiscal Agent:

- Documentation of fiscal agent's 501(c)(3) federal tax-exempt status (IRS)
- Documentation of fiscal agent's Iowa non-profit status (Iowa Secretary of State)
- Copy of an agreement signed by both the fiscal agent and the applicant organization detailing the responsibilities of each party

Do NOT include any other support materials.

The panel will **NOT** review any additional support materials. They will be discarded and not returned to applicants.

Incomplete applications are ineligible and will not be reviewed.

The original printed, signed, dated, collated application, including listed support materials only, must be in our office by 4:30 p.m. May 1. This is NOT a postmark deadline.

Please send your application to:

Iowa Community Cultural Grant Program

Iowa Department of Cultural Affairs

600 E Locust St.

Des Moines, IA 50319-0290

Note: Do NOT address grant proposals to a particular staff person.