

**ARTS COUNCIL OF GREATER NEW HAVEN**

**APPLICATION FOR FISCAL AGENCY**

Under the certain conditions the Arts Council of Greater New Haven serves as a fiscal agent for an organization or project which does not have a 501 (c) (3) tax exempt status. To qualify for this sponsorship an organization or project must be within the Council’s mission, not be over burdensome, be feasible in the sole judgment of the Arts Council and pose no inappropriate risks. The decision to grant fiscal agency may be made based on the project’s fit with our exempt purpose and allocation of our resources. Some projects will not qualify at all. If fiscal agency is granted, organization or project will be asked to sign a fiscal agency agreement.

We have outlined below our exempt purpose and asked you for information regarding your organization or project. Satisfying the criteria does not guaranty sponsorship of a project. Granting fiscal agency is within the sole discretion of the Arts Council of Greater New Haven – its Executive Director, Executive Committee and the Board of Directors. In addition, the Board may choose from time to time to limit the number of sponsored projects so as to conserve the resources of the Arts Council. In most cases the Board will assess a fee for this service reflecting some or all of the costs of fiscal agency services.

**Exempt Purpose: The purpose of the Arts Council of Greater New Haven is to work within the Greater New Haven area to create cultural opportunities for public participation in and awareness of the arts, to provide artistic nourishment for population, artists and the arts in the Greater New Haven area and to develop community support for the arts.**

Organization or Project Name \_\_\_\_\_

Name (Contact Person) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Arts Council Member (Organization or individual membership is required for application to be processed; annual membership must be maintained through duration of engagement)

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Incorporated in the State of CT: Yes \_\_\_\_\_ No \_\_\_\_\_;/ State ID# \_\_\_\_\_

We have applied to the U.S.Government for a 501 (c) (3) status \_\_\_ Yes \_\_\_ No

Briefly describe the organization and/or project including mission or purpose, goals and measurable outcomes (you may be asked to provide additional materials)

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Where will the project be located or performed? \_\_\_\_\_

Are the artists engaged in the project local or out of region or state? \_\_\_\_\_  
If not local, from where?

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Is public access permitted or limited? \_\_\_\_\_

What is the cost to attend or participate? \_\_\_\_\_

What is the duration of the project? \_\_\_\_\_

Briefly describe the amount of administrative services required. Will funds come in one lump sum or over a period of time? How many checks will have to be written?

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\_\_\_\_\_  
Signature of lead individual

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**A project or organization budget and three letters of support must be provided for the application to be considered.**

**Applicant must provide proof of insurance coverage as stated in Section 3) of the contract.**