ACE Arts Fee Performance Enhancement Fund Application
Department of Theatre and Dance

Criteria:

“An account provided by the Arts and Cultural Enrichment (ACE) portion of student fees for the purpose of helping to fund guest artists (musicians, composers, fight choreographers, dialect coaches, designers, painters, puppeteers, milliners, etc.) who will work directly with students involved in a THDN production.”

The THDN ACE Arts Fee Granting Committee prefers applications where other sources of funding have been investigated. Particular consideration will be given to projects with multiple funding sources listed.

THDN ACE Arts Fee Grants usually run in the $400-$700 range. Grants up to a maximum of $1000 may be awarded to demonstrably strong applications with special merits (as deemed by the granting committee).

Note: Limit of two ACE Performance Enhancement Fund grants each year per applicant and per production.

Deadlines and Submission Info:

9/02/14, 11/07/14, 2/06/15 and 4/3/15 (Early Bird requests for fall 2015 projects only) -- hard copy with signatures needs to be delivered by 5:00 p.m. to Sharon Van Boven’s mailbox.

Application Checklist:

______ Applicant is directing / choreographing / designing or functioning as a shop supervisor in the THDN Season

______ Guest Artist’s CV or resume is enclosed. (UCB faculty are not eligible)

______ The project description / rationale is no more than two pages double-spaced in length.

______ The request does not exceed $1000.

Applicant's Name _______________________________________________________

___FR ___SO ___JR ___SR ___Grad ___Faculty

E-mail _______________________________________

Title of THDN production ____________________________________________

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Student applicants: name of Faculty Supervisor ________________________________

Student applicants: signature of Faculty Supervisor ____________________________

Name of Guest Artist(s) _____________________________________________________

Abstract:

Briefly summarize the purpose of the project:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Time frame for guest: Beginning ______ Ending ______

Total Amount Requested $_______

Budget for Visiting Artist:

Please provide (on a separate sheet of paper) a COMPLETE line-itemized budget for the entire project. This should include the entire project budget, the total amount being paid to your guest artist, what portion of that payment will come from ACE and all other projected income and expenditures for the project.

Other Budgetary Info:

To what other sources have you applied? Amount requested Amount received

__________________________________________________________________________ $ ________ ________

__________________________________________________________________________ ________ ________

__________________________________________________________________________ ________ ________

__________________________________________________________________________ ________ ________

Total ACE Performance Enhancement Fund request $__________

If the Arts Fee Committee is not able to award the requested amount, what is the minimum amount of money which would make this project viable? $__________
NOTE: applicant is responsible for working with THDN Business Manager and filling out Scope of Work (SOW) and any other forms necessary for execution of this project. For assistance see Sharon Van Boven.

Project Description:

On separate sheets, describe in no more than TWO DOUBLE-SPACED PAGES (12 pt Times New Roman font) the project for which support is sought. Provide adequate information for Arts Fee Committee to understand (1) nature of the project, (2) guest artist’s accomplishments (attach a copy of the curriculum vitae), (3) benefits to the students involved in the THDN production from this person’s involvement, and (4) outcomes expected from this engagement and their contribution to the THDN production.

Applicant Sign-Off:

I assert that I have read and will comply with the instructions in this application and with the Policies and Procedures of the ACE Performance Enhancement Fund and will not exceed the amount awarded.

______________________________________________
Signature of Applicant

______________________________________________
Date