



DELAWARE DIVISION OF THE ARTS

820 N. French Street, Wilmington, DE 19801
302-577-8278 www.artsdel.org



Application # _____ (for official use only)

Individual Artist Opportunity Grant Application

Grant Categories: Check the grant for which you are applying:

- Professional and Artistic Development Presentation Opportunities

Read the *Individual Artist Opportunity Grant Information and Instructions*, at: www.artsdel.org/grants/artistgrants.shtml, before completing this application form. All supplemental information requested in the instructions must be included with this form for the application to be complete. Submit two (2) collated copies of the full application packet that includes this form and all supplemental information. **First-time applicants:** A W-9 form must be on file with the State of Delaware. Complete form at <https://dew9.accounting.delaware.gov/accounting/w-9.nsf/w9!OpenForm>.

Artist Name _____

Mailing Address _____

City _____ State DE Zip _____

Telephone _____ Fax _____

E-mail _____

Web _____

County: _____ Legislative district: _____ State House _____ State Senate _____

DE resident since (month/year) _____ **Legislative District Link:** <http://pollingplace.delaware.gov>

Title of Artistic Development or Presentation Opportunity: _____

Grant request \$ _____ Project begin date: _____ Project end date: _____

Authorization

I do hereby certify that the board of directors of this organization has given formal approval for submission of this application and that all figures, facts, and representations made in this application are true and correct to the best of my knowledge. Submission of the application signifies intention of compliance with all guidelines and restrictions imposed by the Delaware Division of the Arts, a state agency, and the National Endowment for the Arts (NEA), a federal agency. I acknowledge that I have reviewed a copy of the *Delaware Division of the Arts Grantee Responsibilities* and the *National Endowment for the Arts Requirements for Subgrant Recipients* (www.artsdel.org/grants). This organization will comply with Title VI of the 1964 Civil Rights Act; the Drug Free Workplace Act of 1988, Title IX of the Education Amendment of 1972, the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975, and Section 504 of the Rehabilitation Act of 1973. I also certify that any funds received with this application will not be used for lobbying and will be expended for the project described, and I understand that the organization may be precluded from future DDOA funding if I fail to submit a final report at the conclusion of the grant period.

Signature of artist _____ Print name _____ Date _____

For Office Use

Director, Delaware Division of the Arts _____ Funding Source _____