



The State Organization
on Arts and Disability

2011-2012 Arts Inclusion Program Application

Application Deadline: Postmarked by Oct 12, 2011. Mail two complete copies of your application to: VSA Kentucky, 21st Floor, Capital Plaza Tower, Frankfort, KY 40601. Faxed or late applications will not be accepted.

For any questions, contact Mary Claire O'Neal, VSA Program Director, in the Frankfort Office at (502) 564-3775 on Monday, Wednesday or Thursday. **FAXED APPLICATIONS WILL NOT BE ACCEPTED. Enclose two complete sets of your application.**

SECTION A

Applicant Information

Please use this form as it appears here. Fill in all answers electronically. This form cannot be saved once you begin, so you may want to print one out as a worksheet first before you begin to fill the fields in on your computer. Forms filled out by hand will not be reviewed.

School Name

South Todd Elementary County Todd

Congressional District# (1-6)¹

School Address 4115 Guthrie Road

City Guthrie Zip 42234 Phone (270) 265-5785

Name of Site Coordinator Tammy Hollon Email tammy.hollon@todd.kyschools.us

Site Coordinator Home Phone (270) 847-6146 Home Email tfhsunflowergirl@yahoo.com

Name of Principal Camille Dillingham Principal's Email camille.dillingham@todd.kyschools.us

Signature of Site Coordinator

Signature of Principal

Date

10/7/11

SECTION B.**Funding Request Information**

1. Title of Project or Activity Journey to Appalachia by Singing, Dancing and Creating
2. Provide a one-sentence description of the proposed project or activity
Projects designed to encourage student development in visual art, music and dance while appreciating Traditional Appalachian culture.
3. Proposed date(s) of project: Beginning March 19, 2012 Ending March 30, 2012
Projects scheduled prior to January 16, 2012 or after May 1, 2012 will not be considered.
4. Number of students who will directly participate in this project 91
5. Number of students with disabilities to be directly participating in this project 8
6. Projected number of students who will indirectly benefit from this project _____
7. Total number of teaching artists participating in this project 2
8. Amount requested (must be \$1,200.00) \$1200
(If approved, money will not be disbursed until after we receive your signed funding agreement.)
9. *Amount of cash match (cash match is strongly encouraged (but not required), and **does not** have to be dollar for dollar with amount requested). (Must itemize source(s) and amount).
\$2, 217.00 School

Total \$2,217.00
10. *Amount of in-kind by applicant
(Itemize source and amount)
\$300.00 (per diem) -lodging at Site
Coordinator's home

Total \$300.00
- *See descriptors on budget page (Section F) for cash and in-kind explanation.**
11. **Total Budget for this project:**
(Add lines 8, 9, and 10) \$ 3,717.00
12. Did your school apply for the Arts Inclusion Program last year? Yes ☒ No ☐
13. If so, did you receive funds? Yes ☒ No ☐