



# Grant Application Form - Individual Artist

*Tuscaloosa County Artists Only*

Arts and Humanities Council of Tuscaloosa County  
P.O. Box 1117  
Tuscaloosa, AL 35403  
Questions - [director@tuscarts.org](mailto:director@tuscarts.org) or [education@tuscarts.org](mailto:education@tuscarts.org)

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## Section A Applicant Information

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Artist's Name: \_\_\_\_\_ County: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone Numbers:  
Home: \_\_\_\_\_

City: \_\_\_\_\_ Office: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Legal Resident of Tuscaloosa County since  
(month/day/year): \_\_\_\_\_

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## Section B Request Profile

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Nature of Request (check only one): Fellowship Technical Assistance

Amount of Funds Requested: \$ \_\_\_\_\_  
*Attach a budget reflecting anticipated expenditures.*

Arts Discipline and Area in which you plan to work during the grant period:

- Dance Theatre
- Literature Visual Arts & Crafts
- Media Folk Arts
- Music

Date(s) of Activity: Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

Number of Individuals to Benefit: \_\_\_\_\_ Number of Artists Participating: \_\_\_\_\_

List the Cities, Counties and Schools where Activites will actually take place:

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Provide a brief description of why funds are being requested and or generally how support from the proposed category would be used in the development of your artistic interests.

Provide a brief description of your work, i.e. style, medium, objectives, emphasis, technique, what you hope to communicate, special characteristics.

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**Section C    Resume Summary**

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*Present Employment*

Employer's Name &amp; Address: \_\_\_\_\_

Position/Occupation: \_\_\_\_\_

*Education/Training*

Institution/School/Tutor	Dates	Major Area of Study	Degree

*Awards/Major Shows/Honors/Other Fellowships*

Name of Award/Show	Date	Description	Prize/Amount

(A comprehensive resume may be attached if desired but is not required.)

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**Section D    Examples of Work**

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Please list attachments/samples of work. Please indicate if you want the attachment/sample returned. (A shipping envelope with sufficient postage must be provided where return is desired.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

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**Section E    Certification**

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I certify that the foregoing statements are true and complete to the best of my knowledge. Should funding result from my application, the funds will be used to advance my career, during the the specified grant period, in a manner consistent with the concept of the Small Grants Program, with the type of work represented by samples submitted.

Signature \_\_\_\_\_ Date \_\_\_\_\_