## 26951 - 2026 Cycle 1 Short Order Grant Application Components

Application Details						
Funding Opportunity:						
26942-Short Order Project 2026-01 (Arts In Educ	cation, Dance, Multidisciplinary Arts/Culture, Music, Theater, Visual Arts and Local History)					
Funding Opportunity Due Date:	Feb 1, 2026 4:00 PM					
Program Area:	Project					
Status:	Editing					
Stage:	Final Application					
Initial Submit Date:						
Initially Submitted By:						
Last Submit Date:						
Last Submitted By:						
Contact Information						
Primary Contact Information						
Active User*:						
Type:						
Name:	Salutation First Name Middle Name Last Name					
Title:						
Email*:						
Address*:						
	City State/Province Postal Code/Zip					
Phone*:	Phone ###- Ext. ###-####					
Organization Information						
Status*:						
Name*:						
Organization Type*:						
Organization Website:						
Address*:						

City State/Province Postal Code/Zip

Phone\*: ###-###

Date when organization received 501(c)(3) federal tax-exempt status (mm/dd/yyyy):

(mmddyyyy)

## **Project Information**

Primary activities must fall within project period described in Funding Opportunity.

**Project Start Date\*:** 

**Project End Date\*:** 

Select category that best describes project (selection influences which advisory panel reviews application)\*:

Date(s) during which community can attend and/or participate in project\*:

Specific venue(s) or location(s) where community will attend and/or participate in project\*:

Estimate Number of Individuals Engaged or Served

Estimate Primary Community/Population Served

## Ethnicity:

Black/African American\*:

American Indian\*:

Asian American\*:

Hispanic/Latino\*:

White/Caucasian\*:

Other\*:

Combination of all ethnicities:

Age Group(s):

Youth (less than 18)\*:

Adult (18 to 30)\*:

Adult (31 to 60)\*:

Older Adult (60 plus)\*:

Find your County Supervisors: https://dcimapapps.countyofdane.com/supervisors/?page=Who-is-my-Supervisor%3F

Dane County Supervisory District\*:

Indicates the communities your project will serve.

Additional notes about community/population served that explain selections. (Max length is 50 words)

Community/Population Description\*:

Provide a one or two sentence summary that could be used in future press releases to describe your project. (Max. length is 50 words/1000 characters.)

Applicant Type*:							
Fiscal Receiver / S	Secondary Contact Information	n					
	Use this section to enter the contact information for your Fiscal Receiver, if your organization is using one. If you are not, you may use this section to provide information for an additional project contact person, if appropriate.						
Fiscal Receiver:							
Contact Person:							
Title:							
Mailing Address:							
Phone:							
Email:							
How did you hear abou	ut this opportunity?:						
Project Narrativ	re						
Keep in mind that formatt	ing of text (size, bold/italic, font variations)	w you will present to the community. (350 words on the character limit. To maximize the character limit.		s plain text. If you			
Project Description*:							
		ounty. (350 words maximum/3600 characters)					
Audience & Public Val		. 't	ata wa N				
Evaluation*:	a achieves goals and now will you measure	e its success? (350 words maximum/3600 chara	cters)				
Lvaluation .							
Budget							
Budget  Project Expenses (Ca	sh)						
Project Expenses (Ca	sh) ory Notes (25 char. limit)	Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Ca Category Explanat		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Ca		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Ca Category Explanat Expense 1		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Ca Category Explanat  Expense 1  Expense 2		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Ca Category Explanat  Expense 1  Expense 2  Expense 3		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Cal Category Explanat  Expense 1  Expense 2  Expense 3  Expense 4		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Cal Category Explanat Expense 1 Expense 2 Expense 3 Expense 4 Expense 5 Expense 6 Expense 7		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Cal Category Explanat  Expense 1 Expense 2 Expense 3 Expense 4 Expense 5 Expense 6		Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Cal Category Explanat Expense 1 Expense 2 Expense 3 Expense 4 Expense 5 Expense 6 Expense 7	ory Notes (25 char. limit)	Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Cal Category Explanat Expense 1 Expense 2 Expense 3 Expense 4 Expense 5 Expense 6 Expense 7 Expense 8	ory Notes (25 char. limit)	Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Cal Category Explanat  Expense 1  Expense 2  Expense 3  Expense 4  Expense 5  Expense 6  Expense 7  Expense 8  Requested Percentage	ory Notes (25 char. limit)  ve e Covered by Grant:	Expense Covered by Grant	Cash Expense Amount	Total Expense			
Project Expenses (Cal Category Explanat  Expense 1 Expense 2 Expense 3 Expense 4 Expense 5 Expense 6 Expense 7 Expense 8  Requested Percentage  Percentage of Expense	ory Notes (25 char. limit)  ve e Covered by Grant:	Expense Covered by Grant	Cash Expense Amount  Status	Total Expense			
Project Expenses (Cal Category Explanat Expense 1 Expense 2 Expense 3 Expense 4 Expense 5 Expense 6 Expense 7 Expense 8  Requested Percentage Percentage of Expense	re e Covered by Grant:	Expense Covered by Grant					
Project Expenses (Ca  Category Explanat  Expense 1  Expense 2  Expense 3  Expense 4  Expense 5  Expense 6  Expense 7  Expense 8  Requested Percentag  Percentage of Expense  Project Income (Cash	re e Covered by Grant:	Expense Covered by Grant					

Income 4				
Income 5 Income 6				
Income 7				
Income 8				
In-Kind (Non-Cash)				
Category	Explanatory Notes (25 char. limit)		Status	Amount
In-Kind 1				
In-Kind 2				
In-Kind 3				
In-Kind 4				
Budget Narrative				
_	dget figures. Be sure that any explanation of budget figures in this	s section matches the hudget t	faures included abo	we (2 000 characters may)
Budget Narrative:	aget ligules. De sure that any explanation of budget ligules in this	s section matches the budgeth	igures iricituded abc	ve. (2,000 characters max)
Budget Summary				
Total Expense Amount:				
Cash Income Amount:				
Expense Covered by Gra	ant (Request			
Amount):	in (reguese			
Budget Balance				
Expenses minus Income. TI	his should be \$0.00			
Zero-Based Budget:				
In-Kind				
In-Kind Amount:				
Attachments/Sup	oplemental Materials			
<u> </u>	•			
Named Attachment		Required Descript	ion File Name 1	Type Size Upload Date
IDC to do not have a common FOA/	(-)(2) determine the reference are supported to the second			
	(c)(3) determination for your organization or fiscal receiver			
Letter of Commitment from	sing a Fiscal Receiver Only)			
	riscal Receiver			
Required  Please make sure that this l	letter is signed (electronic is fine) and dated.			
Current Letter of Support #1		✓		
Other Optional A	ttachments			
Named Attachment				File Upload on Name Type Size Date

Additional letter of support from the community at large (highlighting artistic quality/merit, public value, commitment, ability to implement successfully) – suggested especially for first-time applicants

Work Sample (such as: photos, videos, audio recordings, print media, curriculum, etc)

Logo or Image (to be used in listing project/program on a website if awarded a grant)

Other

## Authorization/Certification

Fields

Applicant/Authorized Official\*:

Title\*:

Date Signed\*: