

2024 FDDC Artisan Fund Grant Application

Please provide proof of tribal ID with your application.

SECTION I: APPLICANT INFORMATION						
MAIN CONTACT						
Name:			Date o	f Birth:		
Present Address:						
City:	State:	Zip Code:			County:	
Home Phone:	Cell:			Fax:		
E-mail:						
Tribal Affiliation:						

SECTION II: BUSINESS INFORMATION			
BUSINESS INFORMATION			
Name of Business:			
Primary Business Address:			
City:		State:	ZIP Code:
EIN:		S Codes:	
Legal Structure:			
Are you a: 🗆 Start-up (less than 3 years) 🛛 Growing (3-5 years) 🗆 Underway (5 years or more)			
Number of Employees: □ Present □ Projected F/T P/T Seasonal			

	SECTION III: QUESTIONNAIRE
1.	Tell us about your artistic practice and how this grant is appropriate and vital at this stage of your business growth.
2.	Describe your artistic products. How are they made? How is your art unique?
3.	Tell us about who would like to purchase your art? Where do they like to buy your art?
4.	Where do you make your art? Tell us if you have a team that will help you make your art?
5.	How will engaging in this business growth phase develop your artistic entrepreneurship?
6.	What next steps in your artistic entrepreneurship would be made possible after completing this phase of your business growth?
7.	How do you showcase your artwork? Do you utilize social media or another avenue altogether?

SECTION IV: EXPERIENCE LIST AND DESCRIPTION

OPTIONAL: Provide at least 3 arts-based experiences you have engaged in over the past 5 years that relate to your artistic business growth you want to engage in and briefly describe how each experience demonstrates progression of your artistic trajectory leading to your artistic business growth.

Briefly describe the overall relevancy of the experiences you listed to the opportunity.

SECTION V: TIMELINE OF PROPOSED ACTIVITES			
Date	Description of Activity		

SECTION VI: USE OF GRANT FUNDS		
Working Capital	\$	
Description:		
Equipment, Machinery, Computers	\$	
Description:		
Furniture & Fixtures	\$	
Description:		
Inventory	\$	
Description:		
Real Estate/Studio Rental Fees	\$	
Description:		
Other (Freight/Shipping Costs, Travel, Registration)	\$	
Description:		
Total Project Costs	\$	

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SECTION VII: PROJECTED INCOME VS EXPENSE			
	Year 1	Year 2	Year 3
Sales			
-Cost of Goods Sold			
= Gross Profit			
-Rent			
-Payroll/Owner's Pay			
-Utilities			
-Internet			
-Marketing			
-Other			
=Net Income			

SECTION IX: GRANTEE'S ACKNOWLEDGEMENT

I certify that everything I have stated in this application and on any attachment is true and correct.

You may keep this application whether or not it is approved.

I agree to provide receipts for the total amount of the grant if it is approved.

APPLICANT'S SIGNATURE

	Date:		
SPONOR'S SIGNATURE (IFAPPLICABLE)			
	Date:		
FDDC EXECUTIVE DIRECTOR			
	Date:		

SPONOR'S INFORMATION (IFAPPLICABLE)		
SPONSOR NAME:		
SPONSOR ADDRESS:		
SPONOSOR PHONE:		
SPONSOR RELATIONSHIP TO APPLICANT:		