



**CHILDREN'S THEATRE FOUNDATION OF AMERICA**  
**FOUNDERS PROJECT FULFILLMENT GRANT**  
**Request to Submit Application Form**

DEADLINE: JANUARY 16, 2018

Organization Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Grant Contact Person: \_\_\_\_\_

Contact E-Mail \_\_\_\_\_ Contact Phone \_\_\_\_\_

Project Coordinator (if other than contact person): \_\_\_\_\_

Coordinator Email \_\_\_\_\_ Coordinator Phone \_\_\_\_\_

Website: \_\_\_\_\_

Date and Title of last CTFA grant received (if applicable): \_\_\_\_\_

Date organization began operations: \_\_\_\_\_

Are you an IRS certified not-for-profit organization? Y/N \_\_\_\_\_ Date of incorporation \_\_\_\_\_

Total FY 17 operating budget: \_\_\_\_\_

Grant amount requested \_\_\_\_\_ *Grant period: September 1, 2018 – August 30, 2020*

Organizational mission statement:

Organizational diversity statement/leadership plan:

\_\_\_\_\_



- Provide a CONCISE AND EXPLICIT DESCRIPTION of your project that addresses each of these criteria: (500 words maximum)

**Racial Equity, Diversity and Inclusion (35%)**

How does your project address issues of racial equity, diversity and inclusion?

**Excellence in Theatre Artistry (25%)**

How does your project indicate the potential for excellence in theatre artistry?

**Innovation (20%)**

How is this project aesthetically and socially innovative?

**National Impact (20%)**

How does this project demonstrate potential national significance and impact upon the field?