

TDT Funding Application Checklist

Organization _____

Project _____

All items marked with an asterisk (*) must receive a check or the application cannot proceed to the Review Panel.

1*) ___ Delivered on time Date _____ Time _____

2*) ___ Funds will be used by applicant for purposes listed below

Check All That Apply

- ___ Promote and advertise cultural tourism in the state of Florida nationally and internationally
- ___ The activity, service, venue or event have, as one of its main purposes, the attraction of tourists as evidenced by the promotion of the activity, service, venue or event

3*) ___ Eligible Organization (must be one of these)

- ___ Nonprofit art or cultural organization or museum
- ___ Unit of government
- ___ School (Select type of school) ___ Public
- ___ Private
- ___ Charter

Overall checks

- ___ *No more than 10 pages for narrative (Total Pages for Tabs 4-9)
Number of pages _____
- ___ *Organized by tabs
- ___ One application labeled “**Original**” containing
- ___ Margins 1 inch (these do not include the footer that will contain the organization name and page numbers)
- ___ *Organization name on all materials
- ___ Pages numbered
- ___ No typeface smaller than 11-point
- ___ All single-sided paper
- ___ In 3 ring binder with front pocket
- ___ Organization Label on All Binders

Tab 1: Application Form

- ___ *Application on form provided
- ___ *Application complete
- ___ The original signed in blue ink (Original Only)
- ___ *Project falls within grant period (11/1/04 – 4/30/06)
Project Dates _____
Actual Event Dates _____

Tab 2: Project Statement

- ___ Describe the proposed project with detailed activities
- ___ Describe key staff and partners, their qualifications, responsibilities and past relevant experience.
- ___ Describe how project will improve exposure and involvement of area.
- ___ *Summarize the project’s timeline.
- ___ *Project physically located in Orange County
- ___ *Accessible and promoted to the public

Tab 3: Project Budget

- ___ *Budget Enclosed
- ___ *Other funds at least equal the request AND
For those requests above \$50,000
 - ___ *No project revenue or U.A. Ops used for match
 - ___ \$50,001 - \$100,000
 - ___ *In-Kind not more than 25% of match
 - ___ \$100,001 - \$250,000
 - ___ *All match in cash
 - ___ *All from specific donations and grants
- ___ *Budget math correct
- ___ *Budget on form provided
- ___ The amount and source of private sector funds (corporate, foundation, other private), which would be used to match TDT funds - please place an asterisk (*) by those sources that are NOT CONFIRMED.
- ___ A detailed description of all in-kind contributions/expenditures.
- ___ An itemized marketing budget, which supports the narrative of Tab 3.

Tab 4: Interpretation & Uniqueness

- ___ Compare your project in terms of its relation to the type and quality of offerings in the same discipline/genre in the community and elsewhere (region, nation, world).
- ___ Identify how you will make your project engaging to attendees
- ___ Identify how you will ensure your project / presentation / interpretation enhances the Orlando Arts Brand.

Tab 5: Community and Economic Impact

- ___ Identify the overall economic impact goals of your project.

Tab 6: Project Readiness

- ___ Describe the status of your project and your organization's capacity for immediate action if selected.
- ___ *Evidence of organization's successful service to and/or projects in Orange County.
- ___ Plan for continuing sustenance for projects to be continued.

Tab 7: Collaborative Partnerships

- ___ Identify partnerships that will participate in the development and promotion of your project
(Be sure to include a letter from each partner named in Tab 13).
- ___ Outline how you plan to keep all project partners involved in the project.

Tab 8: Educational Program

- ___ Describe whether the project has a meaningful arts/cultural education or education in the arts/cultural component for youth or adults.
- ___ State its goals and objectives.
- ___ Identify any strategies to reach under-served populations.

Tab 9: Marketing Plan

- Outline of marketing plan
- Describe targeted tourism markets by geographics, demographics, and psychographics.
- *Include a reasonable timeline for your marketing plan.
- If needed, be sure to show evidence of long term planning.
- Outline any tourism goals and for major visitor services in your proposed region
 - Region _____
 - retail
 - restaurant
 - visitor centers
 - number of hotel rooms
 - other
- *System for measuring out-of-county visitors

Tab 10:

- *As a Florida nonprofit, tax-exempt organization, you are required to register with the State as a charity. Please provide a copy of your registration letter or that of your fiscal agent.

Tab 11

- *List of current officers and board members
- Organization chart

Tab 12

- Audited financial statements of most recently completed fiscal year (smaller budget organizations provide year-end financial statements signed by organization's treasurer or accountant).

Tab 13

- Letters(s) from ALL collaborative partner(s) endorsing the project and providing specific project support activities (Must have letter from each partner named in Tab 7)

Tab 14

- Matching-funds confirmation letters and any other support materials

Tab 15

With Original Application Only

- *Most recent IRS determination letter documenting federal tax-exempt status (if not already on file)
- *IRS Form 990 for the most recently completed fiscal year (if required by IRS)