

BROOKFIELD CULTURAL COUNCIL
6 Central Street
Brookfield, MA 01506

Monday, September 21, 2009

Dear LCC applicants,

Deadline for LCC Grants for next year is October 15, 2009.

Forms attached. Details on the web at Massachusetts Cultural Council.

Brookfield is allocated \$4,000.00 for this annual program.

Please mail your requests on time to meet the MCC guidelines.

Thank you,

William Simpson



Local Cultural Councils

in partnership with the Massachusetts Cultural Council

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BROOKFIELD CULTURAL COUNCIL

Brookfield

Contact Us

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Local Cultural Council Program

Application Instructions

The next postmark deadline is **October 15, 2009**.

Before applying for an LCC grant:

1. Become familiar with the LCC Program's [criteria and eligibility requirements](#).
2. [Contact each LCC](#) directly to inquire about their local guidelines.

Then complete the application form ([Word](#) and [PDF](#) versions are available). Print it, sign it, and mail it to the appropriate LCC. Emailed applications will not be accepted. LCC applications are mailed directly to the local cultural council, not the MCC.

Please note, grants from LCCs are reimbursement-based. The applicant expends their own money, and if approved for a grant, then submits paperwork for reimbursement.

Get [Capital expenditure supplemental questions \(PDF\)](#).

Tips for using the PDF application

In order to open a PDF file, you will need to download the FREE Adobe Reader to your computer. Once Adobe Acrobat Reader is installed, you can open files stored in PDF format by double clicking the PDF file link.

To fill out the application, click in the field that you want to type in. You can use the tab key to move between fields or simply use your cursor and click in the desired area. Type your information into each field.

If you are entering a description into a larger text box it will automatically wrap around and fit itself within the space provided. You will see this when you click on a different box or hit tab to get to the next box.

When you have completed the application click on the "Save" icon and choose a destination on your computer where you would like to save your file.

Tips for using the Word application

Type your answers into the shaded gray boxes on the form. When the box stops expanding you have reached the character limit for that field.

To move through the form use the "Tab" key. PLEASE DO NOT USE YOUR "RETURN" KEY. Using your return key will break up the formatting and make it difficult to read and evaluate your application!

If you have difficulty accessing or printing the Word version, use the PDF version instead.

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Revised 6/08

APPLICATION NUMBER (FOR LCC USE ONLY) _____

LCC GRANT APPLICATION

APPLICATION MUST BE TYPED.

- Please type into the form, print, sign and mail it to the appropriate Local Cultural Council. E-mailed applications will not be accepted.
- Before completing this form be sure to check the guidelines of the LCC to which you are applying at www.mass-culture.org/lcc_public.asp.

This application is being submitted to the _____ LCC.

APPLICANT INFORMATION

Applicant's Name _____

Contact Person _____

Mailing Address _____

Contact Mailing Address _____

City/State/Zip _____

Contact City/State/Zip _____

Applicant Phone/TTY _____

Contact Phone Day/Evening _____

Applicant E-mail Address _____

Contact E-mail Address _____

Applicant Web Site _____

PROJECT INFORMATION

Project Title _____ Amount Requested from this LCC \$ _____

Project Start/End Dates _____ Approximate Number of People Served _____

1. Project Description: Summarize the proposed project in the space provided. Describe who is the target audience; what will happen; when and where it will occur; and how the project will be executed. NOTE: You may provide additional narrative on a separate sheet of paper, but you *must* summarize the project here. Your answer in the space below may not exceed 750 characters.

2. Describe the planning process for this project. What individuals and organizations have been involved as partners and/or advisors? How would partial funding impact this project? Your answer in the space below may not exceed 500 characters.

3. Explain how this project will reach and benefit the citizens of *this* community. How will you know the project is successful? Include promotion, expected results and plans for evaluation. Your answer in the space below may not exceed 500 characters.

4. Describe your plans for promoting this project to your target audience and your community. Include information on planned outreach and publicity activities. Your answer in the space below may not exceed 500 characters.

5. Please detail the qualifications of key artists, humanists, interpretive scientists or organizations involved with leading the cultural component of this project. **Application will be considered incomplete without this information.** Please attach resumes. Your answer may not exceed 500 characters.

BUDGET INFORMATION

Total Project Cost \$ _____

Matching Funds* \$ _____ Source of Matching Funds _____

* Capital expenditures must have a 2:1 match. Check with the local cultural council to see if there are any additional match requirements.

PROJECT EXPENSES

A. Salaries/Fees

1. Artist/Humanist/ Interpretive Scientist \$ _____
 2. Administrative \$ _____
 3. Other \$ _____
 TOTAL Section A \$ _____ 0

B. Space Rental

\$ _____

C. Travel

\$ _____

D. Marketing

\$ _____

E. Remaining Project Expenses

1. Equipment Rental \$ _____
 2. Project supplies or consumables \$ _____
 3. Printing \$ _____
 4. Shipping/Postage \$ _____
 5. Utilities/Telephone \$ _____
 6. Insurance \$ _____
 7. Other \$ _____
 8. Ensuring Access \$ _____
 TOTAL Section E \$ _____ 0

F. Capital Expenditures

\$ _____

G. TOTAL PROJECT EXPENSES*

(Sum of Totals in Sections A - F) \$ _____ 0

*NOTE: Total Project Expenses and Total Project Revenue must be equal.

PROJECT INCOME

A. Earned Income \$ _____

B. Non-Government

1. Corporate/Business \$ _____
 2. Clubs and Organizations \$ _____
 3. Other \$ _____
 TOTAL Section B \$ _____ 0

C. Government

1. Other Local Cultural Councils \$ _____
 (Attach list specifying LCC names and \$)
 2. Other MCC Programs \$ _____

 3. Other (Municipal, School, etc.) \$ _____

TOTAL Section C \$ _____ 0

D. Applicant Cash \$ _____

E. Amount Requested from this LCC \$ _____

F. In-Kind Contributions \$ _____

(donated space, materials and/or services)

G. TOTAL PROJECT REVENUE* \$ _____ 0

(Sum of Totals in Sections A - F)

Authorized Signature: The signature below is that of the person authorized to testify as to the accuracy of this application and the person who agrees that the required acknowledgment will be given to the Massachusetts Cultural Council and the granting local cultural council, if this application is approved. This person also agrees that reasonable accommodations will be made to insure that people with disabilities have equal physical and communications access, as defined by federal law and as outlined in the MCC's LCC Program Regulations and Guidelines.

Signature _____ Title _____ Date _____

FOR CULTURAL COUNCIL USE ONLY

SUBMITTED BY DEADLINE? Yes No

\$ _____
 Amount Approved _____ Signature of LCC Chair or Authorized LCC Member _____ Title _____ Date _____