

Annual AIE Grant Request: \$ _____ (Total Column A)

Annual Residency Cost: \$ _____ (Total Columns A+B)

NOTE: Year Two grant request cannot exceed Year One grant request.

Expenditures

Income Sources and Amounts

	A AIE Grant Year One	B School Cash Match	C AIE Grant Year Two	D School Cash Match
Artist-in-Residence Fee (\$275 x ___ days) (Must be 20 days or more per year)				
Visiting Artist/Company (See pg. A5 for fees)				
On-Site Evaluator	\$ 200.		\$ 200.	
Supplies/Materials				
Equipment				
Field Trips				
Release Time/Substitute Fees				
Documentation/Evaluation/Publicity				
Administrative Cost (Specify)				
Artist/Teacher Institute (\$625 tuition per person)	\$ 315.		\$ 315.	
Other (Specify)				
Totals				

NOTE: For One- or Two-Year Grants, Column B total must **at least match** Column A total.
For Two-Year Grants only, Column D total must **at least match** Column C total.

Description of Cash Match Sources

Cash Sources	Amount	Cash Sources	Amount
1.		3.	
2.		4.	

Cash Sources: The total AIE grant must be matched dollar for dollar and be spread over the various expenditure categories.

In-Kind Sources: Please use space below to list any donated materials or services for the project and their estimated cash value. While not included in the project cash budget, it is helpful information for the grant review process.

Estimated Total Value \$ _____