

Date: May 5, 2009

Agenda Item No. 3(J)(1)(A)

To: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

From: George M. Burgess
County Manager

Resolution No. R-449-09

Subject: Ratification of Grant Application to the National Endowment for the Arts for Funding to Support the Ceramics Residency and Outreach Program at the Deering Estate at Cutler

Recommendation

It is recommended that the Board adopt the attached resolution ratifying the submission of a grant application to the National Endowment for the Arts (Attachment A) in the amount of \$128,550 to support the Ceramics Residency and Outreach Program at the Deering Estate at Cutler. It is further recommended that the Board authorize the County Mayor or County Mayor's designee to receive and expend grant funds, and execute contracts, agreements and amendments as required by program guidelines. Ratification of this application is necessary because the application deadline of March 19, 2009 did not allow time to submit a resolution to the Board prior to submitting the application.

Scope

The Deering Estate at Cutler is located at 16701 SW 72nd Avenue in Commission District 8. The property is open to all residents and visitors of Miami-Dade County. The project impact is County-wide.

Fiscal Impact/Funding Source

The grant will contribute \$128,550 towards the estimated total project cost of \$263,123. The project match of \$134,573 will be provided from the Deering Estate's FY2009 - FY2010 general fund subsidy allocation.

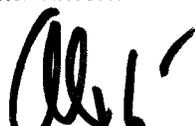
Track Record/Monitor

The grant will be administered by Rahul Shrivastava, Grants Administrator at Miami-Dade Park and Recreation Department. During the past twenty years, the Miami-Dade County Department of Cultural Affairs has received approximately \$500,000 in grant funds from the National Endowment for the Arts.

Background

The Ceramic Residency and Outreach Program is part of the Artist in Residence Program at the Deering Estate, which is open to professional artists in the visual, performing and literary arts. Grant funds are being requested to enhance an indoor/outdoor clay art studio and fund a Clay Mobile studio for outreach programs for schools and community groups. The grant will also fund operating costs of the programming efforts for the overall Artist Village Program, specifically the Artist in Residence and Visiting Artist Outreach Programs. The Deering Estate has welcomed 13 Artists in Residence since 2007.

Attachment



Alex Muñoz,
Assistant County Manager



MEMORANDUM

(Revised)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: May 5, 2009

FROM: 
R. A. Cuevas, Jr.
County Attorney

SUBJECT: Agenda Item No. 3(J)(1)(A)

Please note any items checked.

- "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- 6 weeks required between first reading and public hearing
- 4 weeks notification to municipal officials required prior to public hearing
- Decreases revenues or increases expenditures without balancing budget
- Budget required
- Statement of fiscal impact required
- Bid waiver requiring County Mayor's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 3(J)(1)(A)
5-5-09

RESOLUTION NO. R-449-09

RESOLUTION RATIFYING THE SUBMISSION OF A GRANT APPLICATION TO THE NATIONAL ENDOWMENT FOR THE ARTS FOR \$128,550.00 IN GRANT FUNDING TO SUPPORT THE CERAMICS RESIDENCY AND OUTREACH PROGRAM AT THE DEERING ESTATE AT CUTLER; AND FURTHER AUTHORIZING THE COUNTY MAYOR OR THE COUNTY MAYOR'S DESIGNEE TO RECEIVE AND EXPEND FUNDS, AND TO FILE AND EXECUTE CONTRACTS AND AMENDMENTS AS REQUIRED

WHEREAS, this Board desires to accomplish the purpose outlined in the accompanying memorandum, a copy of which is incorporated herein by reference,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board ratifies the submission of a grant application to the National Endowment for the Arts for \$128,550 in grant funding to support the Ceramics Residency and Outreach Program at the Deering Estate at Cutler; and further authorizes the County Mayor or County Mayor's designee to execute such contracts and amendments as are required by this governmental body following approval by the County Attorney's Office; to receive and expend all monies for the purposes described in the funding request; file and execute any necessary amendments to the agreement for and on behalf of Miami-Dade County, Florida.

The foregoing resolution was offered by Commissioner **Jose "Pepe" Diaz**, who moved its adoption. The motion was seconded by Commissioner **Carlos A. Gimenez** and upon being put to a vote, the vote was as follows:

Resolution No. R-449-09

Agenda Item No. 3(J)(1)(A)

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Dennis C. Moss, Chairman	aye		
Jose "Pepe" Diaz, Vice-Chairman	aye		
Bruno A. Barreiro	aye	Audrey M. Edmonson	aye
Carlos A. Gimenez	aye	Sally A. Heyman	aye
Barbara J. Jordan	aye	Joe A. Martinez	aye
Dorrin D. Rolle	aye	Natacha Seijas	aye
Katy Sorenson	aye	Rebeca Sosa	absent
Sen. Javier D. Souto	aye		

The Chairperson thereupon declared the resolution duly passed and adopted this 5th day of May, 2009. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: **Diane Collins**

Deputy Clerk



Approved by County Attorney as
to form and legal sufficiency.

A handwritten signature in black ink, appearing to read "MR", is written over a horizontal line.

Monica Rizo

Opportunity Title:	NEA Access to Artistic Excellence FY2010, Deadline 1
Offering Agency:	National Endowment for the Arts
CFDA Number:	45.024
CFDA Description:	Promotion of the Arts Grants to Organizations and Individ
Opportunity Number:	2009NEA01AAE1
Competition ID:	NONE
Opportunity Open Date:	01/30/2009
Opportunity Close Date:	03/12/2009
Agency Contact:	Artist Communities, Music, Opera, Presenting: 202/682-5438 Dance, Design, Media Arts, Museums, Visual Arts: 202/682-5452 Folk & Traditional Arts, Musical Theater, Theater: 202/682-5428

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name:

Mandatory Documents

Move Form to Complete

Move Form to Delete

Mandatory Documents for Submission

Application for Federal Domestic Assistance-Sho.
NEA Supplemental Information
NEA Organization & Project Profile
Attachments

Optional Documents

Move Form to Submission List

Move Form to Delete

Optional Documents for Submission

Instructions

- 1** Enter a name for the application in the Application Filing Name field.

 - This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
 - You can save your application at any time by clicking the "Save" button at the top of your screen.
 - The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.
- 2** Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.

 - It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.
 - The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents".
 - To open and complete a form, simply click on the form's name to select the item and then click on the => button. This will move the document to the appropriate "Documents for Submission" box and the form will be automatically added to your application package. To view the form, scroll down the screen or select the form name and click on the "Open Form" button to begin completing the required data fields. To remove a form/document from the "Documents for Submission" box, click the document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.
 - All documents listed in the "Mandatory Documents" box must be moved to the "Mandatory Documents for Submission" box. When you open a required form, the fields which must be completed are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.
- 3** Click the "Save & Submit" button to submit your application to Grants.gov.

 - Once you have properly completed all required documents and attached any required or optional documentation, save the completed application by clicking on the "Save" button.
 - Click on the "Check Package for Errors" button to ensure that you have completed all required data fields. Correct any errors or if none are found, save the application package.
 - The "Save & Submit" button will become active; click on the "Save & Submit" button to begin the application submission process.
 - You will be taken to the applicant login page to enter your Grants.gov username and password. Follow all onscreen instructions for submission.



APPLICATION FOR FEDERAL DOMESTIC ASSISTANCE - Short Organizational

Version 01

*** 1. NAME OF FEDERAL AGENCY:**
 National Endowment for the Arts

2. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:
 45.024

CFDA TITLE:
 Promotion of the Arts_Grants to Organizations and Individuals

*** 3. DATE RECEIVED:** Completed Upon Submission to Grants.gov **SYSTEM USE ONLY**

*** 4. FUNDING OPPORTUNITY NUMBER:**
 2009NEA01AAE1

*** TITLE:**
 NEA Access to Artistic Excellence FY2010, Deadline 1

5. APPLICANT INFORMATION

*** a. Legal Name:**
 Miami-Dade County

b. Address:

* Street1: 111 NW 1st Street, 29th Floor	Street2:
--	-----------------

* City: Miami	County: Miami-Dade
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* State: FL: Florida	Province:
--------------------------------	------------------

* Country: USA: UNITED STATES	* Zip/Postal Code: 33128-1994
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c. Web Address:
 http:// www.deeringestate.com

* d. Type of Applicant: Select Applicant Type Code(s): B: County Government	* e. Employer/Taxpayer Identification Number (EIN/TIN): 596000573
---	---

Type of Applicant:	* f. Organizational DUNS: 004148292
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Type of Applicant:	* g. Congressional District of Applicant: 18, 17
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*** Other (specify):**

6. PROJECT INFORMATION

*** a. Project Title:**
 Ceramic Residency and Outreach at Artist Village

*** b. Project Description:**

The Artist in Residence Program offers professional visual, performing, and literary artists the opportunity to pursue their artistic discipline, interact with other artists, while being surrounded by the Deering Estate at Cutler's inspiring environment. Artists in Residence participants offer their time and talent for school youth and community groups as a volunteer in the Visiting Artist Outreach Program (VAO). Requested funds will enhance an indoor/outdoor Artist in Residence studio to accommodate clay art medium, finance a Clay Mobile studio (used for outreach program for schools and community groups), and provide operating costs to facilitate programming efforts for the overall Artist Village, specifically the Artist in Residence and Visiting Artist Outreach Programs at the Estate.

c. Proposed Project: * Start Date: 01/01/2010 *** End Date:** 12/31/2010

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APPLICATION FOR FEDERAL DOMESTIC ASSISTANCE - Short Organizational Version 01

7. PROJECT DIRECTOR

Social Security Number (SSN) - Optional:

000-00-3369

Disclosure of SSN is voluntary. Please see the application package instructions for the agency's authority and routine uses of the data.

Prefix:	* First Name:	Middle Name:
<input type="text"/>	Jennifer	<input type="text"/>
* Last Name:	Suffix:	
Tisthammer	<input type="text"/>	
* Title:	* Email:	
Exhibits and Collections Coordinator	tistj@miamidade.gov	
* Telephone Number:	Fax Number:	
305-235-1668 ext 232	305-254-5866	
* Street1:	Street2:	
16701 SW 72nd Avenue	<input type="text"/>	
* City:	County:	
Miami	Miami-Dade County	
* State:	Province:	
FL: Florida	<input type="text"/>	
* Country:	* Zip/Postal Code:	
USA: UNITED STATES	33157	

8. PRIMARY CONTACT/GRANTS ADMINISTRATOR

<input type="checkbox"/> Same as Project Director (skip to item 9):	Social Security Number (SSN) - Optional: 000-00- <input type="text"/> Disclosure of SSN is voluntary. Please see the application package instructions for the agency's authority and routine uses of the data.	
Prefix:	* First Name:	Middle Name:
<input type="text"/>	Rahul	J.
* Last Name:	Suffix:	
Shrivastava	<input type="text"/>	
* Title:	* Email:	
Grants Administrator	rshriva@miamidade.gov	
* Telephone Number:	Fax Number:	
305-755-7941	305-755-5466	
* Street1:	Street2:	
275 NW 2nd Street, Suite 506	<input type="text"/>	
* City:	County:	
Miami	Miami-Dade	
* State:	Province:	
FL: Florida	<input type="text"/>	
* Country:	* Zip/Postal Code:	
USA: UNITED STATES	33128	

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APPLICATION FOR FEDERAL DOMESTIC ASSISTANCE - Short Organizational Version 01

9. * By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties (U.S. Code, Title 218, Section 1001)

** I Agree

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

AUTHORIZED REPRESENTATIVE		
Prefix: <input type="text" value="Mr."/>	* First Name: <input type="text" value="George"/>	Middle Name: <input type="text" value="M."/>
* Last Name: <input type="text" value="Burgess"/>	Suffix: <input type="text"/>	
* Title: <input type="text" value="County Manager"/>	* Email: <input type="text" value="gburgess@miamidade.gov"/>	
* Telephone Number: <input type="text" value="305-375-5311"/>	Fax Number: <input type="text" value="305-375-1262"/>	
* Signature of Authorized Representative: <input type="text" value="Completed by Grants.gov upon submission."/>	* Date Signed: <input type="text" value="Completed by Grants.gov upon submission."/>	

Authorized for Local Reproduction

Standard Form 424 Organization Short (04-2005)
Prescribed by OMB Circular A-102

National Endowment for the Arts

OMB Number: 3135-0112
Expiration Date: 11/30/2010

Supplemental Information

1. Applicant

* Legal Name:

Popular name (if different):

* For this application, the applicant is serving as a:

* For:

* Total organizational operating expenses for the most recently completed fiscal year: \$

* For year ending (Month/Year, e.g., 00/0000):

2. Application Information

* Project Field/Discipline:

* Category:

* Intended Outcome (select one):

- A1Z: Artists and arts organizations have opportunities to create, interpret, present, and perform artistic work.
- AA2Z: Artistic works and cultural traditions are preserved.
- A3Z: Organizations enhance their ability to realize their artistic and public service goals.
- A4Z: Audiences throughout the nation have opportunities to experience a wide range of art forms and activities.
- A5Z: The arts contribute to the strengthening of communities.

- B1Z: Children and youth will demonstrate increased levels of appreciation, knowledge, and understanding of and skills in the arts based on the application of national, state, or local arts education
- B2Z: Teachers, artists, and others will demonstrate increased knowledge and skills necessary to engage children and youth in arts learning consistent with national, state, or local arts education standards.
- B3Z: National, state, and local entities demonstrate a commitment to arts learning for children and youth consistent with national, state, or local arts education standards.

3. Project Budget Summary

* Amount Requested: \$

* Total Match for this Project: \$

* Total Project Costs: \$

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Organization & Project Profile

OMB Number: 3135-0112
Expiration Date: 11/30/2010

* Applicant (official IRS name):

The National Endowment for the Arts collects basic descriptive information about all applicants and their projects. The information below will help the Arts Endowment to comply with the Government Performance and Results Act (GPRA) and will be used to develop statistical profiles of the projects that it funds to report to Congress and the public. While your responses will not be a factor in the review of your application, this form is a required part of all application packages.

PART 1

This section collects information about the applicant. If you are a parent organization or the lead member of a consortium, your responses should relate to your organization, not the group or component on whose behalf you are applying.

* A. ORGANIZATIONAL STATUS: Select the one item which best describes the legal status of the organization:

- | | | |
|---|--|---|
| <input type="checkbox"/> 02: Nonprofit organization | <input type="checkbox"/> 05: State government | <input checked="" type="checkbox"/> 07: County government |
| <input type="checkbox"/> 08: Municipal government | <input type="checkbox"/> 09: Tribal government | <input type="checkbox"/> 99: None of the above |

* B. ORGANIZATIONAL DESCRIPTION: The following codes work in conjunction with the Organizational Discipline codes in C. below. (e.g., select "Performing Group" here and "Theater" below to indicate that your organization is a theater company). Select the one item which best describes the organization:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> 49: Artists' Community, Arts Institute or Camp | <input type="checkbox"/> 32: Community Service Organization | <input type="checkbox"/> 12: Independent Press | <input type="checkbox"/> 03: Performing Group |
| <input type="checkbox"/> 15: Arts Center | <input type="checkbox"/> 14: Fair or Festival | <input type="checkbox"/> 27: Library | <input checked="" type="checkbox"/> 47: Presenter/Cultural Series Organization |
| <input type="checkbox"/> 16: Arts Council or Agency | <input type="checkbox"/> 30: Foundation | <input type="checkbox"/> 13: Literary Magazine | <input type="checkbox"/> 19: School District |
| <input type="checkbox"/> 17: Arts Service Organization | <input type="checkbox"/> 10: Gallery/Exhibition Space | <input type="checkbox"/> 11: Media-Film | <input type="checkbox"/> 48: School of the Arts |
| <input type="checkbox"/> 26: College or University | <input type="checkbox"/> 38: Government | <input type="checkbox"/> 45: Media-Radio | <input type="checkbox"/> 50: Social Service Organization |
| | <input type="checkbox"/> 28: Historical Society/Commission | <input type="checkbox"/> 46: Media-Television | <input type="checkbox"/> 18: Union or Professional Association |
| | <input type="checkbox"/> 29: Humanities Council or Agency | <input type="checkbox"/> 08: Museum-Art | <input type="checkbox"/> 99: None of the above |
| | | <input type="checkbox"/> 09: Museum-Other | |
| | | <input type="checkbox"/> 07: Performance Facility | |

* C. ORGANIZATIONAL DISCIPLINE: Select the one item which best describes the organization's area of work in the arts (not the project for which it is applying):

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> 07: Crafts | <input type="checkbox"/> 10: Literature | <input type="checkbox"/> 03A: Opera | <input type="checkbox"/> 11: Interdisciplinary |
| <input type="checkbox"/> 01: Dance | <input type="checkbox"/> 09: Media Arts | <input type="checkbox"/> 08: Photography | <input checked="" type="checkbox"/> 14: Multidisciplinary |
| <input type="checkbox"/> 06: Design | <input type="checkbox"/> 02: Music | <input type="checkbox"/> 04: Theater | <input type="checkbox"/> 99: None of the above |
| <input type="checkbox"/> 12: Folklife/Traditional Arts | <input type="checkbox"/> 03B: Musical Theater | <input type="checkbox"/> 05: Visual Arts | |
| <input type="checkbox"/> 13: Humanities | | | |

Organization & Project Profile (continued)

* Applicant (official IRS name):

D. ORGANIZATIONAL RACE/ETHNICITY (OPTIONAL): Select the one item which best describes the predominant racial/ethnic identity of the organization. If at least half of the board, staff, or membership belongs to one of the listed racial/ethnic groups, use that designation. If no one group predominates, select "General":

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> N: American Indian or Alaska Native | <input type="checkbox"/> B: Black or African American | <input type="checkbox"/> O: Native Hawaiian or Other Pacific Islander | <input checked="" type="checkbox"/> G: General |
| <input type="checkbox"/> A: Asian | <input type="checkbox"/> H: Hispanic or Latino | <input type="checkbox"/> W: White | |

E. ACCESSIBILITY (OPTIONAL): Check below as applicable to indicate if the organization's board or staff includes an older adult (65 years of age or older) or a person with a disability (a physical or mental impairment that substantially limits one or more major life activities); otherwise leave blank.

- Older Adults** **Individuals with Disabilities**

PART II

This section collects information about the project.

*** A. PROJECT DISCIPLINE:** Select the one item which best describes the project discipline or subject matter:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> 07: Crafts | <input type="checkbox"/> 09: Media Arts - | <input type="checkbox"/> 03B: Musical Theater | <input type="checkbox"/> 11: Interdisciplinary |
| <input type="checkbox"/> 01: Dance - | <input type="checkbox"/> 09B: Audio | <input type="checkbox"/> 03A: Opera | <input type="checkbox"/> 14: Multidisciplinary |
| <input type="checkbox"/> 01A: Ballet | <input type="checkbox"/> 09A: Film | <input type="checkbox"/> 08: Photography | <input type="checkbox"/> 99: None of the above |
| <input type="checkbox"/> 01C: Modern | <input type="checkbox"/> 09C: Video | <input type="checkbox"/> 04: Theater - | |
| <input type="checkbox"/> 06: Design | <input type="checkbox"/> 09D: Technology/ Experimental | <input type="checkbox"/> 04E: Theater for Young Audiences | |
| <input type="checkbox"/> 12: Folklife/Traditional Arts | <input type="checkbox"/> 02: Music - | <input checked="" type="checkbox"/> 05: Visual Arts | |
| <input type="checkbox"/> 10: Literature | <input type="checkbox"/> 02B: Chamber | | |
| | <input type="checkbox"/> 02C: Choral | | |
| | <input type="checkbox"/> 02F: Jazz | | |
| | <input type="checkbox"/> 02D: New | | |
| | <input type="checkbox"/> 02I: Orchestral | | |

B. PROJECT RACE/ETHNICITY (OPTIONAL): Select the one item which best describes the predominant racial/ethnic identity of the project. If the majority of activities are intended to involve or act as a clear expression or representation of the cultural traditions of one particular group, or deliver services to a designated population listed below, choose that group. If the activity is not designated to represent or reach any one particular group, select "General":

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> N: American Indian or Alaska Native | <input type="checkbox"/> B: Black or African American | <input type="checkbox"/> O: Native Hawaiian or Other Pacific Islander | <input checked="" type="checkbox"/> G: General |
| <input type="checkbox"/> A: Asian | <input type="checkbox"/> H: Hispanic or Latino | <input type="checkbox"/> W: White | |

//

Organization & Project Profile (continued)

* Applicant (official IRS name):

* C. ACTIVITY TYPE: Select the one item which best describes the main activity of the project:

<input type="checkbox"/> 04: Artwork Creation	<input type="checkbox"/> 28: Writing About Art/Criticism	<input type="checkbox"/> 15: Professional Support: Artistic	<input type="checkbox"/> 20: School Residency
<input type="checkbox"/> 05: Concert/Performance/Reading	<input type="checkbox"/> 18: Repair/Restoration/Conservation	<input type="checkbox"/> 29: Professional Development/Training	<input type="checkbox"/> 21: Other Residency
<input type="checkbox"/> 06: Exhibition	<input type="checkbox"/> 22: Seminar/Conference	<input type="checkbox"/> 19: Research/Planning	<input type="checkbox"/> 31: Curriculum Development/Implementation
<input type="checkbox"/> 08: Fair/Festival	<input type="checkbox"/> 25: Apprenticeship	<input checked="" type="checkbox"/> 33: Building Public Awareness	<input type="checkbox"/> 30: Student Assessment
<input type="checkbox"/> 09: Identification/Documentation	<input type="checkbox"/> 02: Audience Services	<input type="checkbox"/> 34: Technical Assistance	<input type="checkbox"/> 35: Web Site/Internet Development
<input type="checkbox"/> 16: Recording/Filming/Taping	<input type="checkbox"/> 36: Broadcasting	<input type="checkbox"/> 12: Arts Instruction	<input type="checkbox"/> 99: None of the above
<input type="checkbox"/> 17: Publication	<input type="checkbox"/> 24: Distribution of Art		
	<input type="checkbox"/> 13: Marketing		
	<input type="checkbox"/> 14: Professional Support: Administrative		

D. PROJECT DESCRIPTORS: Select up to four items that represent a significant aspect of the project:

<input checked="" type="checkbox"/> 9F: Accessibility	<input type="checkbox"/> 9L: Arts for Youth	<input type="checkbox"/> 9D: Arts for Inner-City Communities	<input type="checkbox"/> 9M: Presenting
<input type="checkbox"/> 9O: Arts for Older Adults	<input type="checkbox"/> 9E: Arts for "At Risk" Persons (Adults or Youth)	<input type="checkbox"/> 9C: Arts for Rural Communities	<input type="checkbox"/> 9A: Computer/Digital Technology
	<input type="checkbox"/> 9Q: Arts and Health/Healing	<input type="checkbox"/> 9I: International Activity	
		<input type="checkbox"/> 9B: Touring	

* E. ARTS EDUCATION: Select the one response that best characterizes the extent to which this project involves arts education (i.e., systematic educational efforts with measurable outcomes designed to increase knowledge of and/or skills in the arts):

<input type="checkbox"/> 99: None	50% or more with activities primarily directed to:
<input type="checkbox"/> 02: Some, but less than 50%	
<input type="checkbox"/> 01A: K-Grade 12 Students	
<input type="checkbox"/> 01D: Adult Learners	
<input type="checkbox"/> 01C: Pre-Kindergarten Children	
<input checked="" type="checkbox"/> 01B: Higher Education Students	
	<input checked="" type="checkbox"/> 01: Multiple Groups of Learners

Organization & Project Profile (continued)

* Applicant (official IRS name):

For items F. and G. below, your figures should encompass only those activities and individuals directly affected by or involved in your project during the "Period of Support" that you have indicated for your project (with one exception for broadcasts as noted in help tip for that item). Leave blank any items that are not applicable or for which you do not have actual figures or reasonable estimates.

F. PROJECT ACTIVITY:

<input type="text" value="20"/>	# of artwork(s) to be created	<input type="text" value="0"/>	# of artworks to be identified/documentated
<input type="text" value="6"/>	# of concerts/performances/readings	<input type="text" value="8"/>	# of artists' residencies
<input type="text" value="36"/>	# of lectures/demonstrations/ workshops/symposiums	<input type="text" value="140"/>	# of schools (pre-K through grade 12) that will actively participate
<input type="text" value="6"/>	# of exhibitions to be curated/presented	<input type="text" value="12"/>	# of organizational partners
<input type="text" value="0"/>	# of books and/or catalogues to be published	<input type="text" value="0"/>	# of apprenticeships/internships
<input type="text" value="0"/>	# of artworks to be conserved/restored to save or prevent from decay or destruction	<input type="text" value="10"/>	# of hours to be broadcast on radio, television, or cable

G. PARTICIPANTS/AUDIENCES BENEFITING:

<input type="text" value="35"/>	# of artists	<input type="text" value="14,000"/>	Total # of individuals benefiting
<input type="text" value="140"/>	# of teachers	<input type="text"/>	For radio, television, and cable broadcasts, total audience
<input type="text" value="8,000"/>	# of children/youth		

ATTACHMENTS FORM

Instructions: On this form, you will attach the various files that make up your grant application. Please consult with the appropriate Agency Guidelines for more information about each needed file. Please remember that any files you attach must be in the document format and named as specified in the Guidelines.

Important: Please attach your files in the proper sequence. See the appropriate Agency Guidelines for details.

1) Please attach Attachment 1	OrgBackground_CeramicResidenc	Add Attachment	Delete Attachment	View Attachment
2) Please attach Attachment 2	DetailsofProject_CeramicResid	Add Attachment	Delete Attachment	View Attachment
3) Please attach Attachment 3	ProjectBudgetForm_Ceramics_Ml	Add Attachment	Delete Attachment	View Attachment
4) Please attach Attachment 4	FinancialInfo_CeramicResidenc	Add Attachment	Delete Attachment	View Attachment
5) Please attach Attachment 5	Bios_CeramicResidency_MDC.pdf	Add Attachment	Delete Attachment	View Attachment
6) Please attach Attachment 6	BoardList_CeramicResidency_Ml	Add Attachment	Delete Attachment	View Attachment
7) Please attach Attachment 7	ConsortiumFormNA.pdf	Add Attachment	Delete Attachment	View Attachment
8) Please attach Attachment 8	OptionalBudget_CeramicResiden	Add Attachment	Delete Attachment	View Attachment
9) Please attach Attachment 9	ProgActivities_CeramicResiden	Add Attachment	Delete Attachment	View Attachment
10) Please attach Attachment 10	SpecialItemsIndex_CeramicRes:	Add Attachment	Delete Attachment	View Attachment
11) Please attach Attachment 11	WorksampleIndex_CeramicsResid	Add Attachment	Delete Attachment	View Attachment
12) Please attach Attachment 12		Add Attachment	Delete Attachment	View Attachment
13) Please attach Attachment 13		Add Attachment	Delete Attachment	View Attachment
14) Please attach Attachment 14		Add Attachment	Delete Attachment	View Attachment
15) Please attach Attachment 15		Add Attachment	Delete Attachment	View Attachment

YEAR ONE

APPLICANT: Miami-Dade County Park and Recreation - The Deering Estate at Cutler

GRANT TITLE: Ceramics Residency and Outreach at Artist Village

PERFORMANCE PERIOD: January 1, 2010 thru December 31, 2010

Object Class Categories	FEDERAL SHARE	MATCH	TOTAL PROJECT
<u>Personnel</u>			
Jessica Cabral - Exhibit Coordinator, Coordinator Asst @ .10 FTE	0	9,428	9,428
Jennifer Tisthammer - Project Manager @ .10 FTE	0	8,081	8,081
TBD - Project Coordinator @ .30 FTE	0	10,538	10,538
DEC Marketing, Catherine Ferreira @ .10 FTE	0	8,012	8,012
TOTAL PERSONNEL	\$0	\$36,058	\$36,058
<u>Fringe Benefits</u>			
FICA (.062 x FTE Salary)	\$0	\$2,236	\$2,236
MICA (.0145 x FTE Salary)	\$0	\$523	\$523
Retirement (.0985 x FTE Salary)	\$0	\$3,552	\$3,552
Group Life (.003024 x FTE Salary)	\$0	\$109	\$109
Flex Dollars (\$1,100/person x FTE)	\$0	\$935	\$935
Health Plan (\$8,000/person x FTE)	\$0	\$6,800	\$6,800
TOTAL FRINGE BENEFITS	\$0	\$14,154	\$14,154
<u>Non-Personnel</u>			
<u>Travel Costs:</u>			
Local Travel/Automobile for Guest Artists (\$800/mo. x 7 mos.)	\$5,600	\$0	\$5,600
Local Travel/Clay Mobile for Outreach (\$250/mo. x 12 mos.)	\$3,000	\$0	\$3,000
Local Travel for Visiting Artist Program (\$250/mo. x 12 mos.)	\$0	\$3,000	\$3,000
<u>Equipment:</u>			
Ceramic Equipment	\$10,000	\$0	\$10,000
<u>Consultant Fees/Stipends:</u>			
Monthly Stipend for Food/Living for Guest Artists (\$1300/mo. x 7 mos.)	\$9,100	\$0	\$9,100
Housing for Guest Artists (\$650/mo. x 7 mos.)	\$4,550	\$0	\$4,550
Travel/Guest Speaker Honorarium (LegalArt SeminArt) (\$1500 x 3)	\$4,500	\$0	\$4,500
Ceramic Outreach Instructors (\$35/hr @ 20 hrs/wk for 30 wks)	\$21,000	\$0	\$21,000
<u>Supplies and Materials:</u>			
Artist Studio Enhancements (January 2010)	\$15,000	\$0	\$15,000
Soda Kiln	\$24,000	\$0	\$24,000
Stipend for Supplies (\$500/mo. for 12 mos)	\$6,000	\$0	\$6,000
Clay Materials for Visiting Artist Program at Schools (\$400/mo. x 12 mos)	\$4,800	\$0	\$4,800
Materials Supplies for Creative Art Camps	\$0	\$3,150	\$3,150
<u>Promotion:</u>			
Miami Herald (\$511/mo. x 6 mos.)	\$0	\$3,066	\$3,066
Community Newspapers (\$432 mo. x 6 mos.)	\$0	\$2,592	\$2,592
Other media outlets (\$500/mo. x 6 mos.)	\$0	\$3,000	\$3,000
<u>Other:</u>			
	\$0	\$0	\$0
Curation and Interpretive Guide Printing	\$0	\$3,000	\$3,000
	\$0	\$0	\$0
Resident Studio for 5 other Artists in Residence (\$3/sf @1617sf x 12 mos.)	\$0	\$58,212	\$58,212
Resident Studio for Ceramic Artist in Residence (\$3/sf x 160sf /mo.)	\$0	\$5,760	\$5,760
Clay Mobile (Retrofit) for Visiting Artist Program at schools (outreach)	\$18,000	\$0	\$18,000
Field Trips/Guest Artists for Creative Art Camps (\$250/wk x 12 wks)	\$3,000	\$0	\$3,000
Classroom Facilities for Camps (\$3/sf x 215sf x 4 mos)	\$0	\$2,580	\$2,580
TOTAL NON PERSONNEL	\$128,550	\$84,360	\$212,910
Total Direct Charges	\$128,550	\$134,573	\$263,123
Indirect Charges	\$0	\$0	\$0
TOTAL PROJECT COSTS	\$128,550	\$134,573	\$263,123
	48.9%	51.14%	100%

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