## **Project Information Form**

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Organization:			Application #:
Contact:	First Name:	Last Name:	
Email:			
Phone:		Fax:	

In completing this form, consider **only** those activities recommended for support between the project start and end dates and the individuals who will be directly affected by or involved in those activities. If there is no change from the data submitted with your original application, simply check **NO CHANGE** below.

## There is NO CHANGE in estimates that were submitted as part of the original application.

Provide data for individuals who will directly benefit during the period of support. Leave blank any items that are not applicable or for which supportable estimates do not exist.

Individuals to be Compensated from the Project Budget	Number (do not double count)	
Artists		
Teachers		
Others (e.g., staff, consultants)		
TOTAL		

Audiences/Attendees/Participants/Learners: Enter the estimated number of people to be reached through each method for this project. Do not double count.

"Live" Arts Experience Number of individuals who will visit a venue to engage with the arts, whether through attendance at arts events or participation in arts learning or	Adults	Children/Youth (under 18)	Total			
other types of activities that involve people directly with artists or the arts. Do not count individuals that will be reached primarily through TV, radio or cable broadcast, the Internet, or other media.						
Broadcast - TV, radio, cable						
Distribution of Physical Materials (e.g., CDs, DVDs						
If you will use social and/or other new media to reach people for this project, check the appropriate box.						
Social Media (e.g., Facebook, Twitter, wikis)						

**Other New Media** (e.g., web sites, webcasts, eBooks and other downloads, streaming, cell phone apps)