

**FY 2013 GRANTS FOR ORGANIZATIONS PROGRAM
INTENT TO APPLY FORM — DEADLINE: NOVEMBER 3, 2011**

New applicants and organizations that did not receive a FY2012 grant are required to complete this form. This form serves the interests of applicants by alerting MSAC staff to organizations new to the GFO program and enables them to provide appropriate guidance and assistance before the application deadline. **Please attach a copy of your organization’s mission statement to this form.**

Completed forms may be mailed to MSAC, 175 W. Ostend Street, Suite E, Baltimore, MD 21230 or faxed to 410-333-1062.

Organization			
IRS Exemption Status (please refer to the date on your most recent IRS Letter of Determination)			
Mailing Address			
City	County	State: MD	Zip Code + Four
Contact Person*		Title	
Work Phone – include area code		Home Phone – include area code	
Email		Website	

Check the box of the artistic category that most accurately characterizes the work of your organization:

- | | | | | |
|--------------------------------------------|----------------------------------------------------|---------------------------------------------|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Arts Service | <input type="checkbox"/> Folk and Traditional Arts | <input type="checkbox"/> Multi-Discipline A | <input type="checkbox"/> Music B | <input type="checkbox"/> Visual Arts |
| <input type="checkbox"/> Children’s Events | <input type="checkbox"/> Literary Arts | <input type="checkbox"/> Multi-Discipline B | <input type="checkbox"/> Music C | |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Media | <input type="checkbox"/> Music A | <input type="checkbox"/> Theater | |

Are the activities of your organization primarily artistic? Yes No

Check the box next to the grant type that you plan to apply for:

- | | | |
|--------------------------------------------------|---------------------------------------------|-----------------------------------|
| <input type="checkbox"/> General Operating Grant | <input type="checkbox"/> Arts Program Grant | <input type="checkbox"/> Track II |
|--------------------------------------------------|---------------------------------------------|-----------------------------------|

Briefly describe the activities for which you plan to seek MSAC support.

Please indicate particular questions or concerns you have regarding your MSAC application.