Oneida Nation Arts Program DAP Artist Development Award FINAL GRANT REPORT

Form also available on the website at: www.oneidanationarts.org Requirement: Final grant report due 30 days after the completed activity. If you have questions or concerns, call Sadie at (920) 490-3835 or email swilson1@oneidanation.org

Applicant Information

Name:						
Address:						
City:		State:	Zip Code:			
Daytime Phone (with area code):		E-mail:				
Art Discipline:						
Project Title:						
Project Start Date:		Project End Date:				
ONAP Grant Amount SPENT:		\$				
donated for the pr Grant matched w 2. What were your sour	roject). ith 100% cash (for every \$1 i rces of cash match? (check all] Donations/Scholarships	n grant money, \$1 wa	ney, more than 51¢ was earned/ as earned/donated for the project). ash			
3. How many communi	ity people attended the event?)				
4. How many Oneida and	rtists contributed?					
5. What efforts were ma Indians? (check all th		to ONAP, Wisconsir	n Arts Board and the Oneida Tribe of			
☐ Noted in printed materials		\Box Signage at the	Signage at the event			

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U Verbal that	anks at a public event	[] L	.ette	rs to elected officials

□ Other _____

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6. Please rate the overall success of the project. (10-extremely successful to 1-not very successful):

7. How did you evaluate your project? (check all that apply)				
☐ Knowledge I gained (skills learned)	Feedback from participants			
Increase in sales (number of sales)	☐ Increase in opportunities (made connections for future)			
☐ Increase in visibility (number of people)	Data Collections (counting, reviewing and analysis of records)			
Other				

8. Please give an example of what you learned or what you would do differently.

9. Why was this grant important to your community? (check all that apply)

It provided me an opportunity to learn new things and develop new skills.

It provided me a chance to do something that I wouldn't be able to do without the grant.

☐ It helped me share my talents and arts with the community.

☐ It beautified my community.

It preserved and promoted my cultural heritage and identity.

☐ It generated other revenue for me.

☐ It helped me improve my business skills.

☐ It helped me gain visibility in my community.

Other

Authorizing Signature

Date mm/dd/yy

Date mm/dd/yy

Mail completed applications to: Oneida Nation Arts Program, P.O. Box 365, Oneida, WI 54155.