Oneida Nation Arts Program DAP Artist Fellowship Award FINAL GRANT REPORT

Form available on the website at: www.oneidanationarts.org Requirement: Submit report 30 days after the completed activity. Submit report to Sadie at swilson1@oneidanation.org. If you have questions or concerns, call 920-490-3835.

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| Name: | | | |
|---|-------------------------|-----------|--|
| Address: | | | |
| City: | State: | Zip Code: | |
| Daytime Phone (with area code): | E-mail: | | |
| Grant Amount: | \$1,000.00 | | |
| What was the date(s) of your public performance/display that acknowledged ONAP, Wisconsin Arts Board and National Endowment for the Arts? Please describe your public performance/display (Where was it? What did you do?) | | | |
| 3. How many community people attended the event? | | | |
| 4. What efforts did you use to give recognition/credit to ONAP, Wisconsin Arts Board and the Oneida Tribe of Indians? (Check all that apply) | | | |
| ☐ Noted in printed materials | ☐ Signage at the even | t | |
| ☐ Verbal thanks at a public event | ☐ Letters to elected of | fficials | |
| Other: | | | |