

Chamber Music America

RESIDENCY PARTNERSHIP PROGRAM APPLICATION

Grant Period: July 1, 2009 to June 30, 2010 (for short-term and extended projects)
July 1, 2009 to June 30, 2012 (for multi-year projects)

Completed applications are due in CMA's offices by
December 5, 2008, 5:00 P.M. Eastern Time (this is NOT a postmark deadline)

*This program is supported by JPMorgan Chase, the Doris Duke Charitable Foundation,
and the Chamber Music America Endowment Fund.*

The application can be downloaded from the CMA website at www.chamber-music.org. CMA will not accept handwritten, faxed or e-mailed applications. A checklist is provided at the end of the application.

FUNDING REQUEST

Check only ONE box below for the proposed residency, and indicate amount requested from CMA. See Program Guidelines for residency requirements and funding levels.

Residency Type	No. Activities	Projected Attendance	No. Years (multi-year only)	Amount
<input type="checkbox"/> Short-term (\$2,500 to \$6,000)	___	___		\$ ___
<input type="checkbox"/> Extended (\$5,000 to \$12,000)	___	___		\$ ___
<input type="checkbox"/> Multi-year (Up to \$15,000 per year)	___/yr.	___	___	\$ ___/yr.

PARTNERSHIP INFORMATION

See Program Guidelines for definition of residency partners.

- Ensembles: Complete sections A and C.
- Presenters, Producing Organizations and Festivals: Complete sections A, B and C.

A. Organizing Partner

Organizing Partner Name:		
Organization type (ensemble, producing organization, festival, presenter):		
If ensemble or producing organization, give instrumentation:		
Contact Person:		
Title:		
Street Address:		
City, State, Zip Code:		
Telephone:		
Fax:		
Email:		
Website:		
Current CMA member?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
* Size of budgets for last season (mandatory):	Organizational:	Chamber music:

* For presenters offering a variety of performing arts presentations, please provide the budget for the organization and for chamber music activity separately.

Organizing Partner:

Organizing Partner's history.

If the Organizing Partner is:

- A presenter or festival: provide your organization's missions statement and a brief history.
- A producing organization or ensemble: provide the group's bio, listing current personnel and instrumentation.

All applicants: describe any relevant residency experience.

B. Performing Partner *(if same as Organizing Partner, please skip to section C)*

Performing Partner Name:	
Instrumentation:	
Contact Person:	
Title:	
Street Address:	
City, State Zip Code:	
Telephone:	
Fax:	
Email:	
Website:	
Current CMA member?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Ensemble history *(for presenter and festival applicants only):* provide the group's bio, listing current personnel and instrumentation. Describe the ensemble's past residency experience.

C. Community Partner (*only one Community Partner is required. Use the additional spaces as necessary. If more space is needed, attach an additional sheet.*)

Multi-year applicants should indicate in parentheses the project year (Year 1, Year 2, Year 3) after each Community Partner's name.

Community Partner Name:	
Organization type (library, hospital, school, community center, etc.):	
City, State:	

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City, State:	

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City, State:	

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Organization type (library, hospital, school, community center, etc.):	
City, State:	

NOTE: Applicants are required to submit a letter of commitment from EACH Community Partner participating in the proposed project.

RESIDENCY DESCRIPTION

1. Summary

All applicants: Provide a brief project description in the space below.

2. Goals and Plan

All applicants: What is the Organizing Partner's purpose for presenting and/or performing the residency? Please state the goals of the project. How will you achieve these goals?

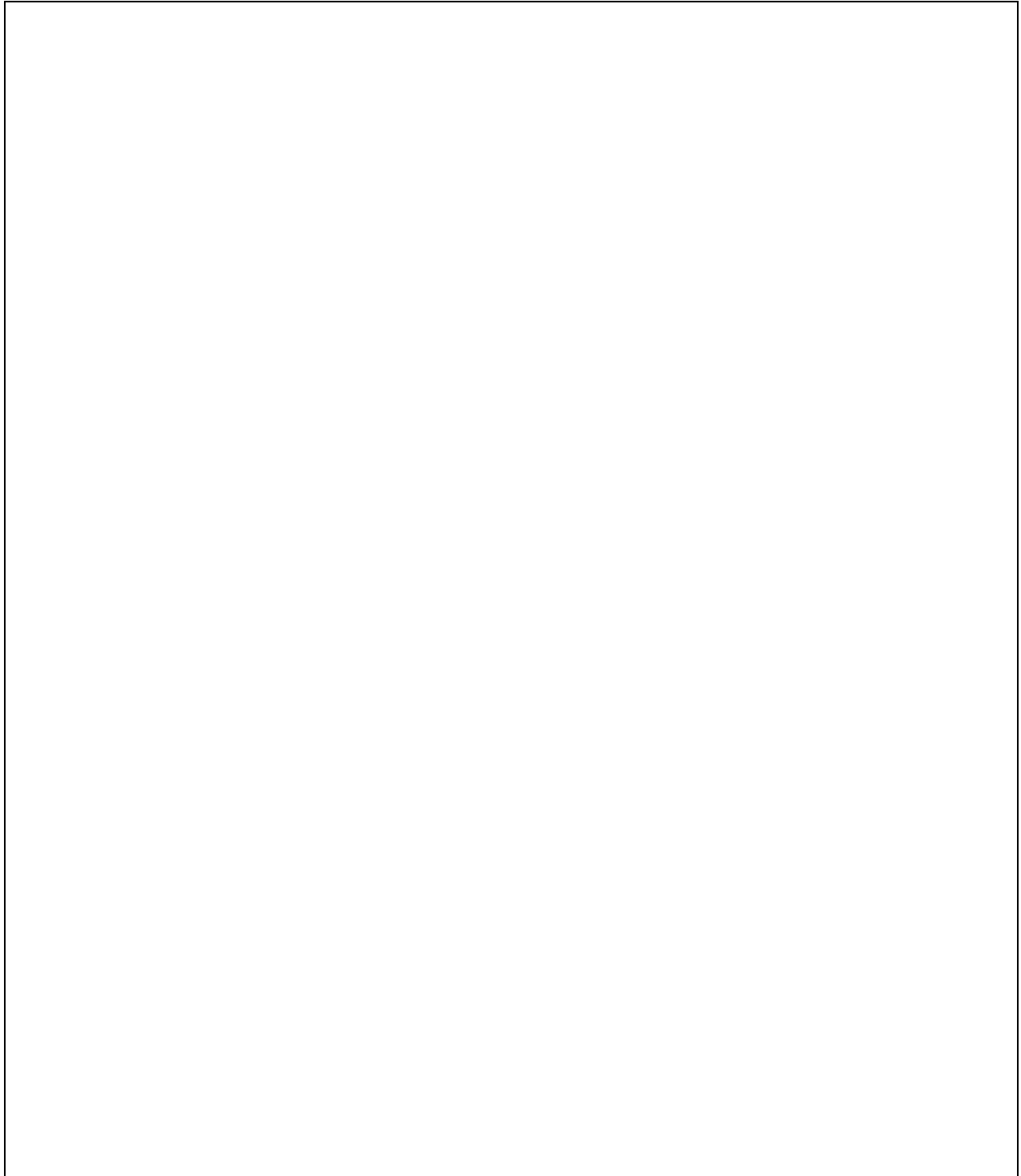
Multi-year Applicants only

Please explain below:

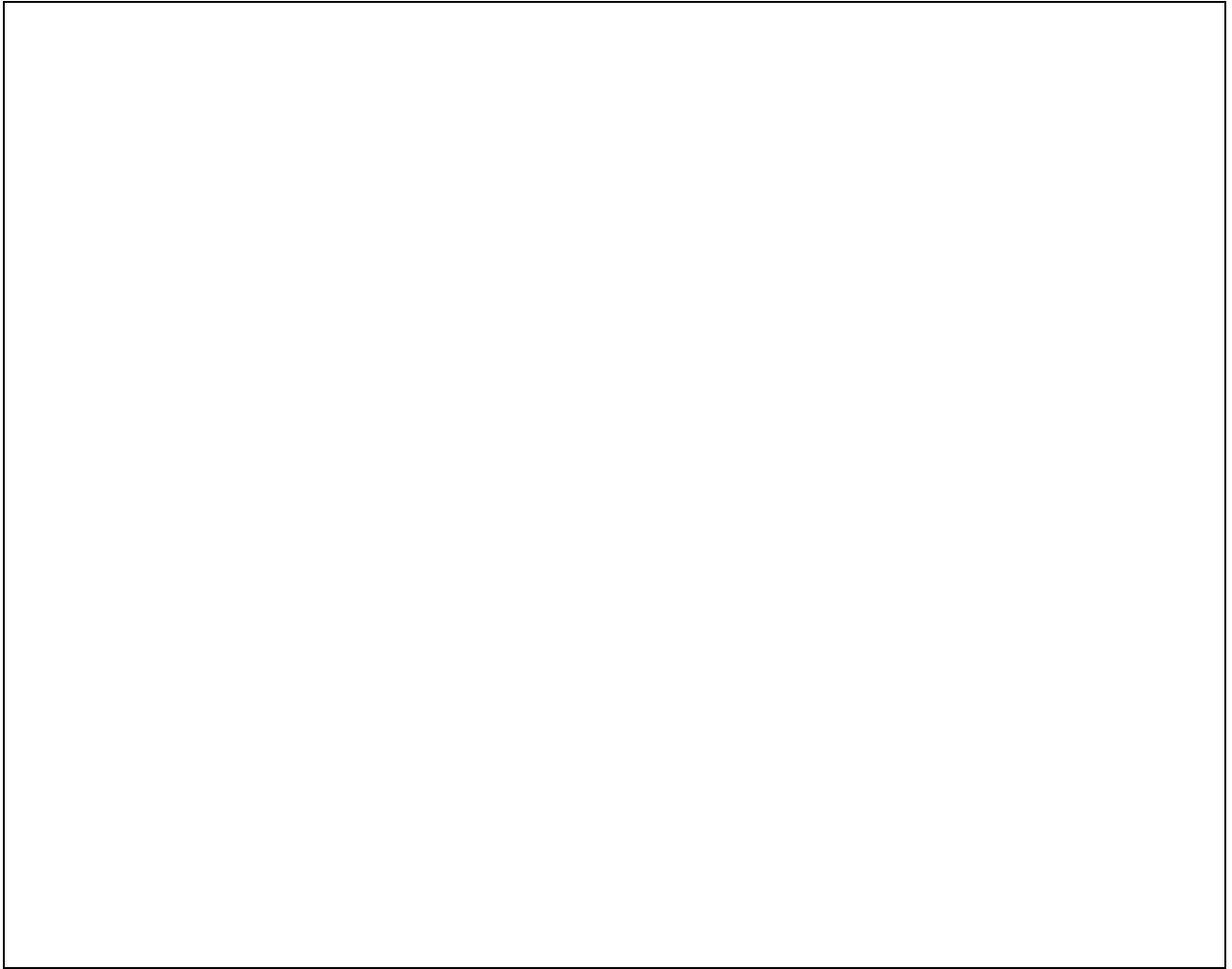
- the specific goal(s) that require(s) more than one year to accomplish;
- your overall plan for the entire multi-year project;
- why multi-year funding is necessary to accomplish the proposed goal(s).

All Applicants: If your program is school-based, please address the following:

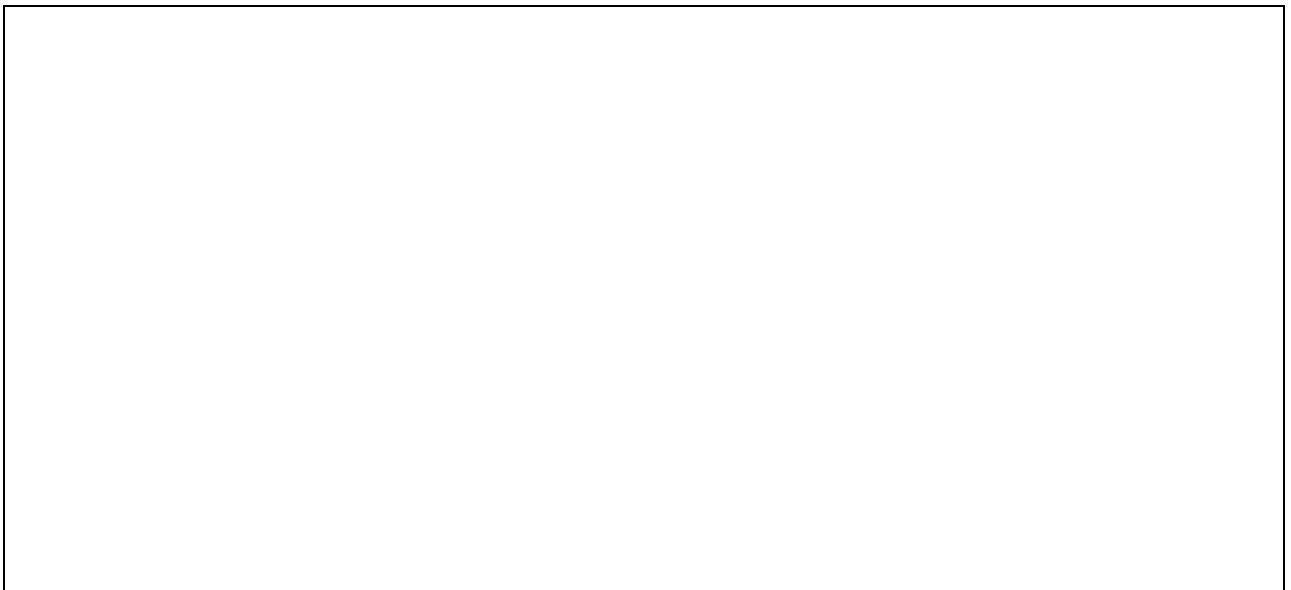
- Briefly describe how you will determine the level of the students' preparedness for the residency.
- Describe the desired outcomes of your program (e.g., knowledge of a particular musical period or style, rhythmic concepts, etc.) and what steps you will take to help the students arrive at these outcomes?
- How do you plan to prepare/involve school administrators and teachers in assuring successful residency activities?
- Describe your ensemble's and/or ensemble members' past residency experience.

A large, empty rectangular box with a thin black border, intended for the applicant to provide their response to the questions listed above. The box is currently blank.

All Applicants: Describe the proposed residency activities; provide details and examples.

A large, empty rectangular box with a thin black border, intended for applicants to describe their proposed residency activities, including details and examples.

All applicants: How will the residency be evaluated?

A large, empty rectangular box with a thin black border, intended for applicants to describe how the residency will be evaluated.

3. Description of Partners

Outline the roles that each of the partners will play in the residency (i.e., planning, coordination, performance and/or evaluation).

4. New Audiences: Underserved Communities

At least one-third of the residency activities must reach an underserved community, as defined by the applicant. Describe the community you intend to reach, in what way it is underserved, and how it will benefit from the residency. Provide demographics, size of community, etc.

Organizing Partner:

BUDGET

(Multi-year Applicants: Please provide figures for Year 1 Only.)

EXPENSES

Performing Partner Expenses

Residency fee	\$ _____	
Guest artists (if applicable)	\$ _____	
Travel/per diem (if applicable)	\$ _____	
Out-of-town transportation (if applicable)	\$ _____	
Local transportation	\$ _____	
Subtotal Performing Partner Expenses		\$ _____

Residency Production and Marketing Expenses

Production costs	\$ _____	
Printing	\$ _____	
Advertising	\$ _____	
Postage	\$ _____	
Subtotal Residency Production and Marketing Expenses		\$ _____

Administrative

Residency Coordinator (if applicable)	\$ _____	
Subtotal Administrative Expenses		\$ _____

Other Expenses *please list*

_____	\$ _____	
_____	\$ _____	
Subtotal Other Expenses		\$ _____

Total Expenses

\$ _____

PROJECT INCOME

Earned Income

Ticket sales	\$ _____	
Other (advertising, CD sales, posters, etc.) <i>please list</i>	\$ _____	
_____	\$ _____	
Subtotal Earned Income		\$ _____

Contributed Income (other than CMA) *indicate confirmed funds with an asterisk*

Government	\$ _____	
Corporate	\$ _____	
Foundation	\$ _____	
Individuals	\$ _____	
Other	\$ _____	
Subtotal Contributed Income		\$ _____

Donated Goods and Services *please list*

_____	\$ _____	
_____	\$ _____	
Subtotal Donated Goods and Services		\$ _____

Requested Amount from Chamber Music America

\$ _____

Total Income

\$ _____

Organizing Partner:

BUDGET NARRATIVE

Please itemize expenses and income in order as they appear on the previous Budget page.

NOTE: No more than 10% of matching funds may come from donated goods and services. These are services, goods, or space for which funds do not have to be expended, including volunteer staff, donated materials, equipment, instrument rentals, supplies, etc. List any donated goods and/or services you expect to receive, their source and approximate value.

Project Expenses	Description
Residency fee	
Guest artists (if applicable)	
Travel/per diem (if applicable)	
Out-of-town transportation (if applicable)	
Local transportation (if applicable)	
Production	
Printing Costs	
Advertising	
Postage	
Residency Coordinator	
Other Expenses (<i>please list</i>)	

Project Income	Description (Please indicate with an asterisk funds that have already been secured)
Earned Income	
Ticket Sales	
Other (advertising, CD sales, posters, etc.) <i>please list</i>	
Contributed Income	
Government	
Corporate	
Foundations	
Individuals	
Other <i>please list</i>	
Donated Goods and Services	

Organizing Partner:

SIGNATURES

Organizing Partner			
Name		Title	
Federal Tax ID or EIN No.			
Signature		Date	
Performing Partner (if applicable)			
Name			
EIN No. or Soc. Sec.			
Signature		Date	

Send application materials in one package to:
Chamber Music America
Residency Partnership Program
305 Seventh Avenue, 5th Floor
New York, NY 10001

LETTER OF COMMITMENT AND WORK SAMPLES

ENSEMBLE'S LETTER OF COMMITMENT (Presenters/Festivals Only)

Please obtain a signed letter from the Performing Partner (written on his/her letterhead) stating the partner's commitment to the Organizing Partner's application.

PERFORMING PARTNER WORK SAMPLE INSTRUCTIONS

- a) Submit one copy of a CD-R Work Sample of 20-30 minutes in length.
- b) Movements from full compositions are acceptable.
- c) Work samples must represent the ensemble's current personnel and feature the ensemble members who will take part in the residency. *Do not choose work samples that feature guest artists.*
- d) Repertoire to be performed in the residency is encouraged, not required, on the work sample. However, recorded works must be stylistically comparable to repertoire in the proposed project.
- e) Use CD-Rs only. Demos, DVDs, cassette tapes, DAT tapes, mini-discs, videotapes, commercially packaged CDs, or MP3 files via email are not accepted.
- f) Live, studio, and "home" recordings are acceptable. Sound quality is not judged but generally affects perception.

In addition, the Work Sample must:

- have been recorded within the past two years,
- use individual tracks for each work or movement;
- not include excerpts from movements.

For ensembles of mixed instrumentation:

- Include at least one work on the work sample with the same personnel and instrumentation (if possible) as the proposed residency. (The program recognizes that individual members and group size may vary from work to work; however, as an established ensemble, the ongoing core of musicians should remain the same.)

Label the Work Sample* with:

- the name of the Organizing and Performing Partners;
- title and composer of each work;
- length of each track;
- and, for mixed ensembles only, performers for each work.

*Mark this information on the insert and the CD-R itself.

NOTE: Please test the CD-R on a standard CD player. Applications with unplayable CDs will be disqualified.

APPLICATION CHECKLIST

Application forms may be downloaded from the CMA website, www.chamber-music.org. Hand-written, faxed or e-mailed applications will not be accepted.

Refer to this checklist when completing the application. Incomplete applications will result in disqualification.

ENSEMBLES OR PRODUCING ORGANIZATIONS	PRESENTERS OR FESTIVALS
<p>Submit 6 COPIES of the following in this order (collated and paper-clipped):</p> <ul style="list-style-type: none"> • Completed application form, one with original signatures • Additional Community Partner pages, if necessary • Organizational budget from most recently completed fiscal year (required of all applicants) • Current fiscal year's anticipated budget • Sample of previous residency materials (if any) * • Sample of past curriculum materials, if proposed project is school-based (if any) * • Letter or statement of commitment from EACH Community Partner involved in the residency • List of concert dates and venues from the past 2 years • Repertoire list <p>Submit ONE COPY of each as follows</p> <ul style="list-style-type: none"> • Three sample programs from the past 2 years • Selected press materials (limit: 3; please include any materials related to previous residencies, if available) <p>Submit ONE Performing Partner Work Sample:</p> <ul style="list-style-type: none"> • Please refer to the Performing Partner Work Sample Instructions <p style="text-align: center;">* required for multi-year applicants</p>	<p>Submit 6 COPIES of the following in this order (collated and paper-clipped):</p> <ul style="list-style-type: none"> • Completed application form, one with original signatures • Additional Community Partner pages, if necessary • Organization's mission statement and one-page history • Organizational budget from most recently completed fiscal year • Current fiscal year's anticipated budget • Presenter/Festival's season brochures from the past 2 years • Sample of the Presenter/Festival's previous residency materials (if any) * • Sample of the Performing Partner's previous residency materials (if any) • Sample of past curriculum materials, if proposed project is school-based * • Letter or statement of commitment from the Performing Partner and EACH Community Partner involved in the residency • Performing Partner's repertoire list • Performing Partner's list of concert dates and venues from the past two years <p>Submit ONE COPY of each as follows:</p> <ul style="list-style-type: none"> • Presenter/Festival's 3 sample programs from the past 2 years • Presenter/Festival's selected press materials (limit: 3; please include any materials related to previous residencies, if available) <p>Submit ONE Performing Partner Work Sample:</p> <ul style="list-style-type: none"> • Please refer to the Performing Partner Work Sample Instructions <p style="text-align: center;">* required for multi-year applicants</p>