

**GRANT REPORT - Final
Creative Fusion Residency**



Residency Period: Spring, 20____ or Fall, 20____

Grant # _____

Date _____

Host Organization: _____

International Artist: _____ Country _____

Contact for this Report: _____ email: _____

Please fill out each section of this form as accurately as possible.

1. PARTNERS/COLLABORATION:

List the partners you worked with in this residency and indicate their roles. *A Major partner is one with whom there was an ongoing and critical relationship through the residency. A Minor partner is one where a single activity took place or a limited, one-time or non-critical relationship existed. Also indicate whether Foundation grant monies supported the partnership or if collaboration was in-kind.*

Partner	Major/ Minor	Services/Activity	Paid or in-kind

Comments?

2. COMMUNITY IMPACT:

Help us understand how many and what kind of individuals were directly impacted by your artist. Please indicate whether this impact was brief or sustained.

Type of individual	How Many?	Limited or Sustained Impact
K-8 Students		
High School students		
College Students		
Local artists		
Adults/general public		

Staff within your organization		
Board or other volunteers		
Other		

Comments?

3. INSTITUTIONAL BENEFIT

Please describe one or two specific benefits you believe your institution derived from hosting this residency.

4. INSTITUTIONAL CHALLENGES

Please identify any challenges or unanticipated problems for your institution that emerged during the residency.

5. IMPROVEMENTS

What could you or the Foundation have done differently that would have either added to the success of the residency or helped to address the challenges or problems you identified?

6. ADVICE

What one or two words of wisdom would you share with another institution that may be contemplating a Creative Fusion residency?

Creative Fusion Residency Financial Report



Please account for grant funds per the expense categories below, and ...

- Add notes* for other/unusual items or to clarify the use of funds.
- **Include cash expended over and above the Foundation's grant funds:**
- **Indicate what if any funds are to be returned to the Foundation unused.**
- Estimate, but do not include in total, in-kind support from your institution or any partner.

Sample/Projected Expense		Actual Expense	
Airfare (round trip)	2,000		Airfare
Local Transportation	1,000		Local transportation
Housing (\$1,500/month)	4,500		Housing
Artist per diem	4,500	4,500	Artist per diem
Materials for Artist (up-to)	2,500		Materials/Supplies
Administrative Fee (up-to)	5,000		Operational Overhead
Receptions/presentations	1,000		Receptions/presentations
Documentation	500		Documentation
Partnerships/Artist Buddy	4,000		Buddy/Partnership Expense*
			Cash Other (1)*
			Cash Other (2)*
			Cash Other (3)*
			Cash Other (4)*
			Cash Other (5)*
			Partner(s) in-kind <i>Do not include in total*</i>
			Other in-kind <i>Do not include in total*</i>
Total Grant	25,000		Total Residency Expense
Unused funds to be returned to the Foundation			

Figures are estimates, but consistent with past expenses for Creative Fusion residencies.

Recognizing that disciplines and living and partnership arrangements may vary widely among residencies, Host organizations may move funds between all categories **except the per diem** to support greater or lesser expenses for the structure and needs of their particular residency with the following exception: **in all cases, Administrative and planning expense combined shall not exceed \$5,000.00.**

NOTES: (add pages if necessary)

Thank You

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