****"The term 'humanities' includes, but is not limited to, the study and interpretation of the following: language, both modern and classical; linguistics; literature; history; jurisprudence; philosophy; archaeology; comparative religion; ethics; the history, criticism and theory of the arts; those aspects of social sciences which have humanistic content and employ humanistic methods; and the study and application of the humanities to the human environment *with particular attention to reflecting our diverse heritage*, traditions, and history and to the relevance of the humanities to the current conditions of national life."  
*--National Foundation on the Arts and the Humanities Act, 1965, as amended*

**HUMANITIES PROGRAMS AND PROJECTS**

**2017 Competitive Grant Cycle**

**Application Instructions**

**Submit 1 complete copy as an electronic PDF to:**

Tracy Herold, Secretary, Beyond the Page Oversight Committee

email: herold@dcls.info

Subject Line: BTP Application 2018

(Direct any questions to her at 608-266-6388 or to the email address above.)

**Use the forms provided.** Use a type size of 10 points or larger. The application must include these elements in this order:

1. Grant Summary (1-2 pages)
2. Certification Form (1 page)
3. Proposal Narrative (1-3 pages)
4. Budget Detail (1 page)
5. Budget Narrative (1 - 2 pages)

THE DEADLINE FOR APPLICATIONS FOR 2015 FUNDING BY THE BEYOND THE PAGE OVERSIGHT COMMITTEE IS **FRIDAY, November 10, 2017**. Notification of funding will be made on December 4, 2017. Projects with one year funding may start as early as January 15, 2018 and must be completed by March 15, 2019. Projects with multi-year funding may start as early as January 15, 2018. Annual status reports are due by December 15 of every year until project completion.

The Oversight Committee has established the following criteria for 2018 competitive funding:

* Projects and programs must be *strongly focused on the Humanities*; see definition above.
* Applications must involve collaboration with at least TWO Beyond the Page libraries.
* Unexpended funds may be redirected to other non-grant related Humanities programming or to purchase collection.
* If the amount of unexpended funds is $200 or more, the project leader must submit plans for the expenditure of said funds to the Beyond the Page Oversight Committee for approval.
* Libraries requiring additional funding for a project, either due to error in estimation or grant preparation, shall be expected to utilize their EZ funding.
* Questions may be directed to any members of the BTP Oversight Committee.
* Proposal ideas are expected to be shared on the dcl-directors and dcl- beyondthepage lists for greater participation.
* Beyond the Page, Madison Community Foundation and the National Endowments for the Humanities are expected to be acknowledged in the PR and marketing materials for every project.

**GRANT SUMMARY**

**Project Title:** Type the project’s title here**.**

**Lead Library:** Name

Address

City, State Zip

### **Project Director:** Name, title Library

### email address

### phone number

### **Fiscal Agent:** Name, title Library

### email address

### phone number

### **Brief Project Description:** Describe your project in 2-3 sentences here (this description will be used in press releases).

**Partner Libraries**, add more cells if needed

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Library** | **Local Project Director** | **Email Address** | **Phone Number** |
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**Budget Totals:**

|  |  |  |
| --- | --- | --- |
| **BTP Funds Requested** | **Matching Funds** | **Total Project Cost** |
|  |  |  |

**Calendar of Events**, add more cells if needed**:**

|  |  |  |
| --- | --- | --- |
| **Title of Event** | **Location** | **Date & Time** |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |

**Project Period:**

The project will begin on: Type beginning date here

The project will end on: Type end date here

The project evaluation is due on: Type date here (30 days past end date listed above)

**Audience:** Describe target audience and estimate audience size

**GRANT PROPOSAL NARRATIVE**

Please answer each of the questions below. (Limit of three pages, single spaced, typeface no smaller than 12 point with one inch margins.)

1. How does your project relate to the Humanities?
2. Describe your project activities. How will you engage your target audience? Provide a preview of the subject matter of the program(s). What will you do to encourage participant conversation and reflection?
3. Identify all library staff involved in the project and their roles. For each staff member, include an estimate of the number of hours that will be devoted to the project [note: if Beyond the Page funding is not sought for staff time, it is not necessary to compute the value of the match in the Grant Budget Detail].
4. Identify all others involved in planning, implementing, and evaluating the project and specify their respective roles. Include name (of individual or group), current institutional affiliation, if appropriate, academic degrees, and/or other experience. Include an estimate of the number of hours that will be devoted to the project [note: if Beyond the Page funding is not sought for this expense, it is not necessary to compute the value of the match in the Grant Budget Detail].
5. What members of the public do you expect to attract to your program/project/outreach? How are you creating public awareness of your project? What are your strategies to diversify your audience?
6. What other organizations are you collaborating with for this project? What is their role?
7. Tell us briefly how you will assess your project’s impact. Will you get feedback from your participants or audience? From your visiting experts or performers? From your organizational partners? Specify any quantitative data you will gather to measure this project’s impact.

**GRANT BUDGET DETAIL**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Expense Item | **BTP Funds**  **REQUESTED** | **Matching Funds** | **Total Funds** | |
| **Personnel** (list people by name)  **•Administration** | | | | |
| Project Director: |  | xxxxxxxxxxx | |  |
| Fiscal Agent: |  | xxxxxxxxxxx | |  |
| Administrative Support: |  | xxxxxxxxxxx | |  |
| **•Program Personnel** (add lines as necessary) | | | | |
|  |  | xxxxxxxxxx | |  |
|  |  | xxxxxxxxxx | |  |
|  |  | xxxxxxxxxx | |  |
| **Travel Food, and Lodging** (list people by name) | | | | |
|  |  |  | |  |
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|  |  |  | |  |
| **Contractual Services (list by name of provider)** | | | | |
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| **Hospitality** | | | | |
|  |  |  | |  |
| Supplies and Services | | | | |
| Supplies: |  |  | |  |
| Printing: |  |  | |  |
| Communication: |  |  | |  |
| Equipment rental: |  |  | |  |
| Promotion: |  |  | |  |
| Facility rental: |  |  | |  |
| Other (specify): |  |  | |  |
| **Totals:** |  |  | |  |

Transfer **Totals** to the Grant Summary

**GRANT BUDGET NARRATIVE**

Use this page to describe in greater depth any part of the proposed budget that you believe needs further explanation. This might be additional information about the purpose of any contracted services, details regarding travel and hospitality costs, specifics of planned purchases within the supplies and services category, or any other explanation or description you believe the Beyond the Page Oversight Committee would find helpful in evaluating your proposal.

**Multi-Year Projects**

If this is a multiyear project, include here the specific amounts of Beyond the Page Funding required for each year you are requesting funds:

**Matching Funds**

List your sources of matching funds from GRANT BUDGET DETAIL above, and what each source is contributing (the amount of cash or the value of in-kind services), any known sources of grants or gifts, and any in-kind contributions. Please note which matching funds have been secured and which are still pending. Matching funds are not required by Beyond the Page, but if necessary for a successful project, they should be included in the grant budget.

**CERTIFICATIONS FORM**

**The applicant hereby certifies to the Beyond the Page Oversight Committee that:**

1. The submission of this proposal has been authorized by the administration of the applicant library, and the project director and fiscal agent listed are authorized to act as the representatives of the applicant in connection with this proposal.
2. All events funded in whole or in part with funding from Beyond the Page will be calendared by the hosting library on [www.beyondthepage.info](http://www.beyondthepage.info).
3. All publicity generated for any event, program, or project funded in whole or in part by Beyond the Page will include credit to Beyond the Page, the National Endowment for the Humanities, and the Madison Community Foundation.
4. All events funded in whole or in part with funding from Beyond the Page will be free of charge for attendees and will be open to all, subject to space limitations of the venue.
5. Any funds granted as a result of this proposal will be administered in accordance with all guidelines and provisions of the Beyond the Page Oversight Committee. Any funds not expended in support of this project will be returned to Beyond the Page c/o Dane County Library Service.
6. A final assessment of the project will be submitted within 30 days of the project’s completion using the form provided. This assessment will evaluate the success of the project relative to the anticipated outcomes and project goals, and will include any measurements specified in the grant application. Any deviations from the proposed budget will be noted. Photographs of events will be included as attachments to the assessment. The assessment will be posted on the administrative section of the Beyond the Page website ([www.beyondthepage.info](http://www.beyondthepage.info)) and submitted to the Secretary of the Beyond the Page Oversight Committee.
7. If applicable, status reports will be submitted by December 15 of each year until the final year of the project (applies to projects with multi-year funding).

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| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature of Project Director**  **Signature of Fiscal Agent**  **Date** |  |