

SCHEDULE A3 – SCOPE OF WORK ART IN THE SCHOOLS

Grantee: _____

Narrative Information

Please describe below the programs/services for which funds have been awarded.

Residency Schedule

Indicate the residency schedule below. Please note that staff may refer to this schedule for the purpose of making **site visits**. If dates, times or locations change, you are responsible for notifying Cultural Funding Program staff.

SITE #	NAME OF SCHOOL	CITY COUNCIL DISTRICT	DATE OF RESIDENCY	TIME OF RESIDENCY
<i>Example</i>	<i>Oakland Elementary</i>	<i>5</i>	<i>Every Tuesday, 10/5/19 – 6/5/20</i>	<i>1:45 pm to 3:00 pm</i>
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SCHEDULE A3

Residency Budget Complete the following budget information. The figures should be similar to those provided in your original application to the Cultural Funding Program. Do not include budget notes.

Fiscal Year (Organizations): ____ / ____ / ____ to ____ / ____ / ____ Check one: FY 19-20 CY 2019 CY 2020

I. FY 2019-20 INCOME

1 CFP ART IN THE SCHOOLS AWARD (AMOUNT MUST MATCH RESOLUTION TOTAL)		\$
School Funds (list specific source)		
2		\$
3		\$
4		\$
5		\$
6	SUBTOTAL SCHOOL FUNDS:	\$
Other Funds (specify source)		
7	State Government (CAC, Prop 49)*	\$
8	Local/Municipal Government (EXCLUDING THIS AWARD)*	\$
9	Individual Contributions (self & others)*	\$
10	Business/Corporate Contributions*	\$
11	Foundations*	\$
12	Fundraising (gross)	\$
13	Other (specify):	\$
14	Other (specify):	\$
15	SUBTOTAL OTHER FUNDS:	\$
16	TOTAL REVENUES: (line 1 plus lines 6 and 15)	\$

II. FY 2019-20 EXPENSES

Artist Fees or Salaries (list by title, including number of artists & fee – e.g., 8 drummers @ \$25)	Number of Persons	Other Funds (use of funds from other sources)	City Funds (indicate expenditure of award amount)	Total Funds (Other Funds + this request)
17	Artistic	\$	\$	\$
18	Administrative	\$	\$	\$
19	Technical Production	\$	\$	\$
20	Other (specify):	\$	\$	\$
21	Other (specify):	\$	\$	\$
22	SUBTOTAL ARTIST FEES OR SALARIES:	\$	\$	\$
Supplies & Materials (itemize and attach a separate sheet if necessary)		Other Funds	City Funds	Total Funds
23		\$	\$	\$
24		\$	\$	\$
25		\$	\$	\$
26		\$	\$	\$
27	SUBTOTAL SUPPLIES AND MATERIALS:	\$	\$	\$
Other Expenses (specify):				
28		\$	\$	\$
29	TOTAL EXPENSES: (line 22 plus lines 27 and 28)	\$	\$	\$

III. SURPLUS (DEFICIT) AT YEAR END (line 16 minus line 29) **\$**