



# IOWA CITY PUBLIC ART MATCHING FUND APPLICATION FORM

PROJECT NAME \_\_\_\_\_

PROJECT LOCATION/ADDRESS \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_

APPLICANT ADDRESS \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

TOTAL PROJECT COST \_\_\_\_\_ MATCHING FUND REQUEST \_\_\_\_\_

PROPOSED PROJECT DATE(S) \_\_\_\_\_

### FUNDING SOURCES OUTSIDE OF MATCHING FUND PROGRAM:

Source	Matching fund amount	Committed or Anticipated?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### BRIEF DESCRIPTION OF THE PROPOSED PROJECT TO BE FUNDED WITH MATCHING GRANT:

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

### EXPLAIN HOW THIS PROJECT IS DEFINED AS "PUBLIC ART" AND DEMONSTRATE THAT THE ARTWORK/EVENT WILL BE LOCATED IN AN AREA OPEN AND FREELY AVAILABLE TO THE GENERAL PUBLIC:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### IF THE PROJECT IS A PHYSICAL INSTALLATION, PROVIDE INFORMATION REGARDING SIZE, WEIGHT, MEDIUM, MATERIALS AND INSTALLATION IN ANY OF THE FOLLOWING FORMATS:

- SITE PLAN SHOWING PLACEMENT OF ART ON SITE
- JPEGS, MODELS, OR RENDERING OF PROPOSED ART
- NARRATIVE IF NECESSARY

EXPLAIN SPECIFICALLY WHAT THE MATCHING FUNDS WILL PAY FOR:

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DESCRIBE THE INTENDED AUDIENCE FOR THIS PROJECT AND WHAT EFFORTS YOU WILL MAKE TO BENEFIT THE BROADER IOWA CITY COMMUNITY:

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DESCRIBE YOUR PARTNERS IN THIS PROJECT AND WHAT ROLE THEY WILL PLAY IN THIS PROJECT (FINANCIAL ASSISTANCE, PROVIDING SPACE, TECHNICAL ASSISTANCE OR OTHER):

PARTNER

CONTRIBUTION

PARTNER	CONTRIBUTION
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(Attach letters of support if available)

EXPLAIN HOW YOU WILL GAUGE A SUCCESSFUL OUTCOME OF THE PROJECT:

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**SUBMISSIONS MUST BE RECEIVED BY**

**5:00 P.M.**

Friday, January 20, 2017 or  
Friday - April 21, 2017

**MARCIA BOLLINGER**

City of Iowa City Public Art Program  
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319-356-5237

HARD COPY OR ELECTRONIC SUBMISSIONS ACCEPTED