



Vermont Arts Council  
#OD-07.0020 - Artist Development Due at least 60 days prior to activity

Applicant: Michele Bailey  
Phone: (802) 828-3294 Email: mbailey@vermontartscouncil.org

VAC Contact: Phone: 802-828-5425 Email: Sonia Rae srae@vermontartscouncil.org  
Document Generated: Wednesday, March 28th 2007, 11:55 am

Vermont Arts Council

Program: Artist Development Due at least 60 days prior to activity

Application: #OD-07.0020

Michele Bailey



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### Individual Profile

Name	Mrs. Michele Bailey
Address	123 Any Street Montpelier, Vermont 05602 County: Washington
Artist Discipline:	Theatre
Email:	mbailey@vermontartscouncil.org
Main Contact Phone #:	(802) 828-3294
Website:	
Vermont Arts Council Identification #:	0
Legal Resident of Vermont?	Yes
Currently available to serve on a panel?	Yes



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### Individual Bio

(SAMPLE BIO) Michele Bailey has worked in the field of arts administration at the Vermont Arts Council since 1988. She is currently the Program Director & 504/ADA Accessibility Coordinator at the Council. She works closely with staff on the development and planning of Council grant programs and services. Since 1996, she has been responsible for administering the Vermont Art in State Buildings Program, a small public art program for new or renovated construction of State buildings. She is currently working at the Council in partnership with the Vermont Agency of Transportation and numerous other organizations to assist with the development of pilot public art programs and enhancement projects on some of Vermont's scenic trails and highways. She serves on the Board of Arts Presenters of Northern New England, a consortium of performing arts presenters.



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### General Information

Grant Amount Requested \$0

Project Start Date

Project End date

Activity:

Project Discipline:

Project Description:

Project/Event Location:

Name of Authorizing Official:

Title of Authorizing Official:

Telephone # of Authorizing Official: () -

Date of certification



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### Project Impact Estimates

Admission Fee - Low:	\$0.00
Admission Fee - High:	\$0.00
Number of artists participating:	0
Number of teachers participating:	0
Number of youth benefiting:	0
Total individuals participating:	0



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## Narrative

**Describe the activity(ies) for which you would like support, including how the grant monies will be used. Be specific.**

**What are your goals for this activity?**

**What are your long term career goals?**

**How will the proposed activity help you to reach your career goals and have a significant positive impact on your career?**

**Have you received an artist development grant for the same or similar activity in the past?**

**If yes, how will this differ?**



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### Artist Budget

<b>Expenses</b>	<b>Cash Expenses</b>	<b>In-kind</b>
<b>A. Personnel Expenses</b>		
Your Time	0	
Other Outside Fees & Services	0	0
<b>Subtotal A. Personnel Expenses</b>	<b>0</b>	<b>0</b>
<b>B. Non-Personnel Expenses</b>		
Space Rental	0	0
Artist Materials	0	0
Marketing / Advertising	0	0
Travel / Lodging	0	0
Other	0	0
<b>Subtotal B. Non-Personnel Expenses</b>	<b>0</b>	<b>0</b>
<b>C. Total Cash Expenses</b>	<b>0</b>	
<b>D. Total In-Kind Contributions</b>		<b>0</b>
<b>Anticipated Income</b>	<b>Cash Expenses</b>	
<b>E. Earned</b>		
Earned	0	
<b>Subtotal E. Earned</b>	<b>0</b>	
<b>F. Private Contributions</b>		
Private Contributions	0	
<b>Subtotal F. Private Contributions</b>	<b>0</b>	
<b>G. Government</b>		
Local	0	
Regional / State	0	
Federal	0	
<b>Subtotal G. Government</b>	<b>0</b>	
H. Applicant Cash	0	
<b>I. Subtotal Cash Income (E+F+G+H)</b>	<b>0</b>	
J. Council Grant Request	0	
<b>K. Total Cash Income (I+J)</b>	<b>0</b>	



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## Budget Narrative



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## Support Materials

**Please describe the artistic support materials you are submitting:**

**Recommended support materials:**

- Brochure of workshop or conference to be attended Not included
- Proof of Vermont residency 1 copy Not included

**Please list any additional support materials you will be sending below:**



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## Signature Page

### **Instructions to applicants**

Print this page, sign it (We must have an original ink signature). Please mail it along with the appropriate number of copies of the support materials (indicated on checklist below) and 1 paper copy of your application to:

Grant Program Manager  
Vermont Arts Council  
136 State Street  
Montpelier, VT 05633-6001

**DEADLINE NOTE:** All materials sent must be postmarked or hand delivered to the Council office no later than 4:30 p.m. by the date of the assigned program deadline.

(For example, if the deadline to submit the application is September 25th, the online submission must be received by 4:30 p.m. on the date of the deadline and any support materials must be postmarked and mailed to the Council on September 25th)

After an application is received, no additions or changes may be made to it. Late or incomplete applications will not be accepted. The Council is not responsible for applications lost in transit. Applications received after the deadline will not be reviewed.

The Council reserves the right to reject incomplete applications. Applications missing any of the following items will not be reviewed:

Application Narrative  
Completed Budget  
Artistic Support Materials (where applicable)  
Fiscal Agent (where applicable)  
IRS 501 (c) 3 tax exempt letter (except for public schools and municipalities)  
Signature of individual(s) authorized to commit the parties to the project  
Contract or letter of agreement with artist(s) and/or consultant(s) (where applicable)

Applications missing other components such as required attachments or signatures may fare poorly in the review process. Membership or application fees submitted with incomplete applications will not be returned.

**AGREEMENT:** I release the Vermont Arts Council and its staff from any liability and/or responsibility concerning loss or damage to materials submitted to the Council whether or not such damage or loss is caused by negligence of the Council or its staff. I understand that if I do not collect my artistic support materials (i.e. CD, DVD, VHS video, digital images, etc.) within 1 year from the date of this application, or provide a self addressed stamped (not metered) envelope with my application, that such materials will be discarded by the Council. (Exception: Manuscripts submitted as part of the support materials for Literature or other disciplines will not be returned, all will be recycled.) Additional attachments will not be returned to applicants.

I understand that failure to respond to any of the items requested in this application may seriously hinder its consideration. I understand and agree that any funds granted as a result of this application are to be used for the purposes set herein. Any changes to the project will be submitted in writing. Changes are subject to the approval of the Executive Director of the Vermont Arts Council. I certify that the information contained in this application, including attachments and support materials, is true and complete to the best of my knowledge and that the undersigned is the person authorized to commit the applicant to abide by the legal and other requirements as printed in the Council's grant guidelines.

\_\_\_\_\_  
Authorizing Official or Artist Applicant (Signature)

\_\_\_\_\_  
Name & Title (please print)

\_\_\_\_\_  
Date