

**RALEIGH ARTS COMMISSION
2025-2026 APPLICANT OVERVIEW
- OPERATING SUPPORT**



**Raleigh
Arts**

SECTION 1 - APPLICANT INFORMATION

Applicant Name: _____

Federal Tax ID# (EIN): _____ Year Organization Incorporated: _____

Physical Address: _____

City: _____ Raleigh _____ State: NC Zip: _____

Mailing Address: _____

City: _____ Raleigh _____ State: NC Zip: _____

Phone: _____ TTY: _____

Website: _____

Grant Application Contact Person

Name: _____ Title: _____

Phone: (W) _____ (C) _____

Email: _____

SECTION 2 - MISSION STATEMENT

SECTION 3 - ORGANIZATIONAL DESCRIPTION

SECTION 4 - 2025-2026 RALEIGH-BASED PROGRAMMING

Provide information here about the **Raleigh** programming for which you are seeking funding that your organization has planned between 7/1/25 - 6/30/26, including dates, locations and brief descriptions for each program. If your organization mounts multiple productions, concerts and/or exhibitions, each one should be noted on this page.