

**ARTS COUNCIL OF CALVERT COUNTY
ARTS IN EDUCATION GRANT
FINAL REPORT
FY 2017**

Name of School

Address

City State Zip Code

Principal/Liaison

Telephone

Date(s) of Program

Project Type/Art Form

Total Number of Students Enrolled in School/Site _____

Percentage of Minority Students _____

Percentage of Minority Faculty _____

Number of Students indirectly involved in project (example attended assembly) _____

Number of Students participating directly with the Artist(s) such as hands-on workshop or Master Class _____

Percentage of Minority Students Participating Directly with the Artist(s) _____

Name of Artist(s)

Number of artists participating _____

INCOME

Arts Council Grant \$ _____

Additional Funds \$ _____

Indicate who provided
any additional funds:

PTA	School	County	Other
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Other income

_____ \$ _____

_____ \$ _____

Total Income \$ _____

EXPENSES

Artist's Fees \$ _____

Artist's Expenses \$ _____

Materials \$ _____

Promotion \$ _____

Total Expenses \$ _____

1. What were the goals of the project and were they met?**2. Describe how the project contributed to school's cultural objectives.****3. Overall evaluation of presentation / project by school staff: (circle one)**

5 Excellent 4 Very Good 3 Good 2 Adequate 1 Inadequate

I hereby certify that this financial statement is, to the best of my knowledge, correct and represents the actual income and expenditures of the project involved.

Signature_____
Date_____
Printed Name_____
Title