

2025 JCS Fund Visual Arts and Music Mini-Grant

DuPage Foundation

Request Detail

Project Name*

Provide a brief name for your project.

Character Limit: 150

Purpose*

Briefly describe the purpose of your request - Example: To support (name or type of program) that will (what will the project ultimately do).

Character Limit: 200

Total Project Cost*

What is the total cost of the project for which you are applying?

Character Limit: 20

Amount Requested*

Grants will range from \$500 - \$2,500

Character Limit: 20

Type of Grant*

Please specify the type of program for which you are applying.

Choices

Visual Arts

General Music

Instrumental Music

Project Narrative

Program/Project Description*

1. Provide a brief description of your program/project.
2. What are the date(s) of the project?

Requests to support an event must be received by the deadline at least two months prior to the event date.

Character Limit: 1000

Project Outcomes*

1. How will this project/program benefit people in DuPage County?
2. How will this project/program create excitement and engagement with the arts in the local community?

Character Limit: 1000

Participant Costs*

Will attendees/students be required to pay fees to participate (e.g. admission, tuition, donation, etc.)?

If so, what is the per person fee/admission and the total estimated revenue?

Character Limit: 1000

Impact

Target Audience*

Who will benefit from this project (e.g. families, children, adults, low-income, seniors, etc.)?

Character Limit: 1000

Number of Individuals Impacted*

1. How many people in DuPage County will benefit from this project during the grant period?
2. How did you arrive at this number?

Character Limit: 750

Staff*

Please upload or list the names and qualifications of those who will staff the project.

Character Limit: 1000 | File Size Limit: 3 MB

Budget

Budget*

Upload the project budget including revenue and expenses.

File Size Limit: 3 MB

JCS Grant Allocation*

Provide specific detail as to how the funds will be allocated. Total should equal the amount for which you are applying.

Character Limit: 1000

Other Funding Sources*

Specify other funding sources or steps you have taken to secure additional funding.

Character Limit: 1000

Electronic Signature

Electronic Signature*

The grant recipient will be required to sign a grant agreement to use funds for the sole purpose stated in the application form. Failure to comply with the terms of the grant agreement will jeopardize any future grants from the DuPage Foundation.

Enter your full name, business title and the date of submission. (e.g.: Erin Smith, Executive Director, March 1, 2025)

Character Limit: 250

Agreement*

By entering your information above and clicking "I agree" below, you are certifying that:

1. the information contained in this application is true and correct.
2. the proposed program/project has been adopted by your organization as a part of its plan of work.
3. you are duly authorized to submit this application.

Your completion of this section constitutes an electronic signature.

Choices

I agree

I do not agree