

ARTS COUNCIL OF FORT WORTH
Grants Program

Grant Panelist Application

APPLICANT INFORMATION

NAME: _____

OCCUPATION: _____

COMPANY/AFFILIATION: _____

MAILING ADDRESS: _____

CITY, STATE ZIP: _____

PREFERRED PHONE: _____ ALTERNATE PHONE: _____

EMAIL: _____

Ethnic background, gender, and geographic distribution are considered to ensure that panel composition represents the diversity present in our community. (Completion of this section is optional.)

ETHNICITY: _____ GENDER: _____

NOMINATOR INFORMATION (if applicable)

NOMINATED BY: _____

NOMINATOR EMAIL: _____

AREAS OF EXPERTISE (check all appropriate)

- Arts Administration
- Media Arts/Film
- Theatre
- Arts Education
- Literary Arts
- Visual Art
- Dance
- Music & Opera
- Other Disciplines: _____

ARTISTIC EXPERIENCE

Please attach a brief bio or resume (*may be emailed to grants@artscouncilfw.org*)

VOLUNTEER INTEREST

Please describe why you are interested in serving on an Arts Council grant panel.

PANEL COMPLIANCE

Have you read the panelist job description and responsibilities? Yes No

Can you commit to the duties and time requirements as outlined? Yes No

SPECIAL REQUIREMENTS

If you have any specific physical needs that require special accommodations during the program, please identify them here: _____

Please send your completed application and resume to grants@artscouncilfw.org or:

Arts Council of Fort Worth
Attn: Director of Programs
1300 Gendy St
Fort Worth, TX 76107

Questions? Call program staff at (817) 298-3037 or email grants@artscouncilfw.org.

SIGNATURE OF APPLICANT

DATE