# ILLINOIS ARTS COUNCIL AGENCY

# FINAL REPORT

# **Special Project Conference and Workshop Attendance**

Final reports are due WITHIN 30 DAYS after the ending date on the Grant Agreement. NOTE: This is a standard form. There are two parts to every final report, a financial section and a narrative section. Both sections must be completed for the report to be accepted. This report must show completely and accurately how the project actually occurred. This will be necessary in assessing the success of this project to Agency and IACA staff working with you in the future.

Reports must be approved and certified by the Organization's Authorizing Official or by the individual grant recipient. Complete this PDF form and save it. The completed form should be saved with your grant # as the file name (such as: 20131234). Email the completed form to Sandra Velazquez (sandra.velazquez@illinois.gov). Consult IACA staff if you have questions.

Grant Number				
City		Zip		
rm	Email Add	ress		
Beg	inning Date	Ending Date		
	\$	GRA		
	\$	EXP		
	\$	INK		
verse)	\$	SPE		
	\$	INC		
(from Narrative)		IND		
		YTH		
Actual Total Artists Participating in project (If zero, enter 0)				
Actual Total Volunteers Participating in project (If zero, enter 0)				
'Grantee' hereby ce	ertifies that:			
ed on Illinois Arts (	Council Agency's Gra			
	Begin	Email Add  Beginning Date  \$		

	AL SECTION - DETAIL is is a standard form. Some lines may no	ot be ap	plicable	e to all projects fur	nded by IACA.	
1.	IACA GRANT AMOUNT	\$		(GRA)		
ACTUAI	L CASH EXPENSES			Actual Cash Expenses	Actual In-Kind Contributions	
2.	Conference or Workshop Registration					
3.	Transportation			- <del></del>		
4.	Lodging					
5.	Other Expenses (specify)					
6.	Actual Total Cash Expenses (Add Items 2 through 5)		(EXP)			
7.	Actual Total In-kind Contributions				(l	INK)
ACTUAI	L CASH INCOME			Actual Cash Income		
8	Income (specify sources)					
9.	Actual IACA Grant Amount Spent	(SPE)	-			
10.	Actual Total Cash Income	(INC)				
10.	(Add Items 8 & 9)	(IIIC)				

#### **NARRATIVE SECTION**

# **Organization Grantees:**

## Attach a narrative of up to two pages addressing the following points:

- 1. Provide the name and job title of individuals that participated in the conference or workshop.
- 2. Describe their participation including sessions attended or tracks followed.
- 3. Explain the benefits of staff attendance for the organization..
- 4. Describe the professional benefit for the attendees.
- 5. Indicate if the benefit was great enough to consider future attendance.

#### **Individual Grantees:**

# Attach a narrative of up to two pages addressing the following points:

- 1. Describe your participation in the conference or workshop including sessions attended or tracks followed.
- 2. Explain how participation benefited your career.
- 3. Indicate if the benefit was great enough to consider future attendance.

All grantees must include a link to or attach a copy of the brochure or agenda to the narrative.

## NATIONAL ENDOWMENT FOR THE ARTS REQUIREMENTS

THE FOLLOWING TWO QUESTIONS ARE PART OF A DATA COLLECTION PROJECT THAT DOCUMENTS NATIONAL TRENDS OF GRANTS IN THE ARTS. COMPLIANCE IS REQUIRED BY THE NATIONAL ENDOWMENT FOR THE ARTS. THE ILLINOIS ARTS COUNCIL AGENCY AGENCY WILL NOT USE THIS INFORMATION DURING THE GRANTMAKING PROCESS.

<b>NEA1.</b> Using the characteristics listed below, please indicate the predominant racial characteristics of your organization. If at least 50 percent of your organization's staff, board of directors or membership belongs to one of the listed categories, then check that category. If none of these apply, check "99."						
	<b>B</b> 50 percent or more Black/African American		<ul> <li>N 50 percent or more American Indian/Alaska Native</li> <li>P 50 percent or more Native Hawaiian/Pacific Islander</li> <li>W 50 percent or more White</li> <li>cent or more of staff or board or membership</li> </ul>			
<b>NEA2.</b> If the majority of the grant activities are intended to involve or act as a clear expression or representation of the cultural traditions of one particular group, or deliver services to a designated population, check that group's code from the list below. If the grant or activity is not designated to represent or reach any one particular group, check Box 99.						
	Asian		N American Indian/Alaska Native			
	Black/African American		P Native Hawaiian/Pacific Islander			
	I Hispanic/Latino	<u> </u>	W White			
□ 99 No single group						