

Oil City Creative Ventures Grant Application

Applicant Information

First Name: _____ Last Name: _____

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ Email Address: _____

Website: _____ Social Media (professional): _____

How did you hear about this grant? Check all that apply.

_____ Newspaper/Print Publication (specify): _____

_____ Social Media

_____ Email

_____ Word of Mouth

_____ Other (specify): _____

What is your artistic or creative discipline? _____

What portion of your annual income is derived from your creative discipline?

- Less than 25%
- 25% - 50%
- 51% - 75%
- 76% - 100%

Brief summary of project to be funded by this grant.

Amount Requested: _____

Estimated start date: _____ Estimated end date: _____

Certification: I certify that I have read and understand the Oil City Creative Ventures Grant Guidelines, and that all information provided as part of this application is true and correct to the best of my knowledge.

Signature: _____

Date: _____