
PennPAT Artist Grant Final Report Form – “Exhibit B”

Application Number _____

Grantee Name _____

Person completing this form _____ Email _____

I certify to the best of my knowledge and belief that this report is true and correct and accurately represents the activities for which the grant award was made, and that all outlays, including awarded grant funds, were spent as set forth in the Grant Award Agreement.

Signature _____ Date _____

Project Start Date _____

Project Ending Date _____

Number of days spent on project: _____

Number of artists directly benefiting from project: _____

My project included: *(check all that apply)*

- Short-term consultant for marketing strategies
- Short-term consultant for artistic issues
- Short-term consultant for management issues
- Video creation
- Audio recording/production
- Design of new print marketing materials
- Photography
- Design of electronic marketing media/website

- Attendance or participation in a workshop or conference
- Showcasing at a conference

If either of the above are checked, please complete page 4 of this report.

- International performance
- If checked, please complete page 5 of this report.

- Other: _____
- If checked, please complete the appropriate page(s) of this report.

URL: _____
If any of the above are checked, please complete page 3 of this report.

What impact do you anticipate this project will have on your future touring? (limit response to visible space)

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Final Project Budget

All grantees must complete this page.

Expenses:

Please list all expenses related to the project - be specific

	Cash	In-Kind

Totals:		
Total Project Expenses:		

Revenue:

Please list sources and amounts of cash used to cover the costs of the project, including the PennPAT Artist Grant.

	Cash

Total Project Revenue: <i>Should equal total cash expenses</i>	
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Print, sign and mail this report to **Pennsylvania Performing Arts on Tour, 230 South Broad Street, Suite 1003, Philadelphia, PA 19102**, within 30 days of the project ending date.

Please attach one copy of any materials created as part of this project.

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For projects involving a consultant, web or graphic designer, photographer, videographer or sound engineer/producer, please provide this person’s contact information and area of expertise below (copy this form for more than one consultant).

Name _____

Address _____

Telephone _____ Email _____

Expertise _____

How satisfied are you with this person’s: (Please check one box for each question.)

	not satisfied	satisfied	very satisfied
expertise in the subject matter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
attitude/manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
timeliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
finished product (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend this person to other artists? (check one)

Highly Recommended

Recommended

Not Recommended

Any additional comments or anecdotes? (limit response to visible space)

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If you attended, participated or showcased at a conference or workshop please indicate the name and location of the conference/workshop below.

How satisfied were you with: (Please check one box for each question.)

	not satisfied	satisfied	very satisfied	N/A
content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
educational offerings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
technical support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend this conference/showcase/workshop to other artists? (check one)

- Highly Recommended Recommended Not Recommended

Any additional comments or anecdotes? (limit response to visible space)

If you were supported for an international performance, please list the presenter, location and date(s) below.

How satisfied were you with: (Please check one box for each question.)

	not satisfied	satisfied	very satisfied	N/A
facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
technical support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
other personal support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
marketing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
potential future impact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you recommend this presenter to other artists? (check one)

- Highly Recommended
 Recommended
 Not Recommended

Any additional comments or anecdotes? (limit response to visible space)