

SALINA ARTS & HUMANITIES

Artist Integration Fund Pilot Program

Artists and performers help make the arts unavoidable in Salina

Introduction

A limited pool of public funding is available to support artists' work in Salina, KS. This fund is intended for creator use to produce arts-centered events in the city. For additional information, contact Salina Arts & Humanities (SAH) at 785-309-5770 or sah@salina.org.

Eligibility & Information

- Applicants must be 18 or older or apply with a fiscal sponsor.
- Funding may be used for performances, installation art, artist social events, murals, busking, exhibits, professional development, event production fees, artist fees, and more at SAH staff discretion.
- Applying does not guarantee funding.
- The event must be intended for public use and take place within the city of Salina, KS between January 1 and November 30, 2025.
- Artists who receive funding must supply a w-9 form before receiving a check.
- This is an open application throughout the calendar year. Applicants may be funded at a maximum of \$500 per application, no more than \$1000 a year per applicant. Matching funds or cost-share is encouraged, but not required.
- Notification of awarded funding will be within ten business days of the application. Funding will be distributed by check within 10 days of submission of the invoice and survey. The applicant is responsible for upfront costs. Under special circumstances, up to 50% of approved funds can be made available ahead of the funded activities.

Artist Integration Fund Application

Name: _____

Applicant Address: _____

Phone: _____ Email: _____

Website (if applicable): _____

Event Name (if applicable): _____

Project Date(s): _____ Venue: _____

Venue Contact: _____ Venue Address: _____

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Time (start/finish): _____

Names of collaborators (if applicable): _____

Description of how the funds will be used: _____

Ticket prices (if applicable): _____

Total Event Cost \$ _____ (required, attach budget)

List other funding sources (amount, funder): _____

How do you plan to market/promote this event? _____

Estimated number of people impacted by this project or program _____

Anticipated outcome for the completed project: _____

Amount Requested \$ _____ (Maximum of \$500 per application, \$1000 per calendar year)

Applicant Signature: _____ Date: _____

SAH Staff Approval: _____ Date: _____

Amount awarded \$ _____ (Salina Arts & Humanities Staff may fund at higher or lower amounts depending on available funds and scale of the project)

Email the completed application to sah@salina.org, turn it in at Salina Arts and Humanities, 211 W Iron, Salina, KS 67401, or mail it to PO Box 2181 Salina, KS 67402.