



Art Connection-Rhode Island
Pawtucket Armory Arts Center
172 Exchange Street
Pawtucket, RI 02860
Tel (401) 335-3229
wingram@artconnectionri.org
www.artconnectionri.org

APPLICATION TO RECEIVE ART

Please mail this application to us
or scan it and send as an email attachment.

To be considered eligible to receive art, all boxes must be checked:

The listed organization:

- Is a 501(c)3 or public equivalent
- Provides direct services to clients on-site
- Has secure areas for art which are used regularly by clients
- Does not have access to funds which could otherwise be used for the purchase of art
- Can provide a rationale for owning and displaying artwork (below)

Name of Organization _____

Address _____

Telephone _____ Email _____

Website _____

Contact Person _____ Title _____

CEO/Executive Director _____

Who can we thank for introducing you to Art Connection-Rhode Island (AC-RI)? _____

Type of Organization ___ Public ___ Nonprofit

Primary Focus of Organization

- | | |
|---------------------------|----------------------------------|
| ___ Community Development | ___ Health |
| ___ Culture | ___ Religion |
| ___ Education | ___ Social Services |
| ___ Environment | ___ Other (please specify) _____ |

How many people do you serve annually? _____

What percentage (%) of your population served are low income? _____ Please specify
criteria used to determine:

Who are your primary constituencies?

- African-American Caucasian Asian-American Hispanic
 Children Teens Elderly Families Women
 Homeless Hungry Abused Disabled Other

Other _____

Where would you like to place art? Art shall be viewed in public service areas (exclusive of personal offices, restrooms, etc.)

- Reception Areas Program Service Areas
 Conference Rooms Other considerations (please specify)

Other _____

Please describe original art that you currently own or exhibit on your premises. _____

How did you acquire this art?

- Gift Purchase from General Fund
 Temporary Loan Purchase from Restricted Fund
 Temporary Exhibit Other (please specify) _____

Does your organization in the normal course of its business budget for the purchase of art?

- yes no

What is your organization's annual operating budget?

- Up to \$100,000 \$1 million - \$3 million
 \$101,000 - \$500,000 \$3 million - \$10 million
 \$501,000 - \$1 million over \$10 million

Please describe your organization's mission and how original artwork can be used by your organization to help achieve its mission and objectives. (Attach paragraph if you wish.)

I certify that this organization is a charitable organization as described in Section 170 of the Internal Revenue Code.

Signature _____

Name (please print) _____

Title _____

Date / /