



GRANT APPLICATION FORM

Form Instructions

- This form must be completed and signed by the applicant and included with the application documents.
- Please see the list of application documents on page 3.
- Depending on the type of project and the grant amount, additional information or documents may be requested.
- All documents must be submitted by e-mail to application@saha.org.tr

Applicant Category Non-profit Art Institution

If Other, [Click here to enter text.](#)

APPLICANT INFORMATION

Name of the organization	Click here to enter text.
Name of Contact Person	Click here to enter text.
Title	Click here to enter text.
Address	Click here to enter text.
Telephone number	Click here to enter text.
E-mail	Click here to enter text.
Website	Click here to enter text.

PROJECT INFORMATION

Project Dates	Click here to enter a date.	until	Click here to enter a date.
Title	Click here to enter text.		
Participating Artists/Curators	Click here to enter text.		

BUDGET

Total Project cost	Click here to enter text.
Amount requested	Click here to enter text.
Other funding applications	Click here to enter text.

COMMISSION

[Choose an item.](#)



GRANT APPLICATION FORM

Please note which of the below concern the following. Please select multiple choices if relevant.

☐ NEW WORK

☐ EXISTING WORK

Name of the Artists [Click here to enter text.](#)

Title [Click here to enter text.](#)

Medium [Click here to enter text.](#)

Size [Click here to enter text.](#)

Edition [Click here to enter text.](#)

☐ PUBLICATION

Title [Click here to enter text.](#)

Format [Click here to enter text.](#)

Pages [Click here to enter text.](#)

Language(s) [Click here to enter text.](#)

Editor(s) [Click here to enter text.](#)

Author(s) [Click here to enter text.](#)

Interviewer(s) [Click here to enter text.](#)

Contributors [Click here to enter text.](#)

Sponsors [Click here to enter text.](#)

Distributor [Click here to enter text.](#)

Selling Price [Click here to enter text.](#)

Date for the Publication Launch: [Click here to enter text.](#)

Useful links related to other publications published by the institution (to give an idea about other artist's publications): [Click here to enter text.](#)

☐ If other, [Click here to enter text.](#)

Information on Participating Artists/Curators

***If contribution is requested for several artists, the data below is required for each of them.**

Name (s) [Click here to enter text.](#)

Artistic name (if relevant) [Click here to enter text.](#)

Date of Birth [Click here to enter a date.](#)

Address [Click here to enter text.](#)

Mobile number [Click here to enter text.](#)

E-mail address [Click here to enter text.](#)

Website [Click here to enter text.](#)



GRANT APPLICATION FORM

ADDITIONAL INFORMATION

Financial Details of the Applicant

Account Holder's Name [Click here to enter text.](#)

Account Number [Click here to enter text.](#)

IBAN [Click here to enter text.](#)

BIC (or SWIFT) [Click here to enter text.](#)

Bank Name [Click here to enter text.](#)

Bank Address [Click here to enter text.](#)

[Bank – branch code \(for Canada\)](#)

[Routing number \(for USA\)](#)

[Sort code \(for UK\)](#)

APPLICATION CHECKLIST

- ☐ Application Form
- ☐ Synopsis of project – single side of A4, 300 words maximum
- ☐ The mission and goals of the organization – single side of A4, 300 words maximum
- ☐ Itemized budget – one A4 sheet
- ☐ Resumes of the authors of the project – formatted to one A4 sheet
- ☐ Artist/Curator biography and portfolio
- ☐ Visual material – 6-8 images; links to audio-visual material; other documentation (e.g. catalogues, press clippings etc.).

On behalf of the Institution/Organization

Name / Title

City

Date