

RONALD BARNES MEMORIAL GRANT APPLICATION

SUBMISSION DEADLINE: MARCH 1, 2024

The committee will only accept electronic submissions. Return applications to the Ronald Barnes Memorial Grant Committee: <u>barnes@gcna.org</u>

The mission of the Ronald Barnes Memorial Grant is to promote the growth and vitality of the North American carillon culture by encouraging study in carillon performance, composition, music history, or instrument design in North America. The Barnes Grant does not commission music, sponsor recitals, or back commercial ventures. All North American residents are eligible to apply. The decision of the jury is final.

Interested applicants are encouraged to review the Letter of Agreement.

CONTACT INFORMATION

Name:							
Last	First	Middle					
Address:		Apt					
City/State or Province/Zip or Po	stal Code/Country:						
Home/Cell Phone:		Work Phone:					
E-mail:							
Are you a US citizen? □ Yes	□ No						
PROPOSAL							
Proposed Study Period:							
Proposed Study Location (s):							
Category: □ Performance □ Co	mposition	ory 🗆 Instrument Design					

PLAN OF STUDY

In this section, provide a *clear and concise* statement outlining your plan of study.

STATEMENT OF JUSTIFICATION

Provide a brief summary paragraph stating why your proposal merits an award as it relates to the goals of the Barnes Grant.

- What are the goals and objectives of your project?
- What are the criteria for success?
- Who is the primary audience for your project?
- What is the benefit of your project to the North American carillon art?

ESTIMATED BUDGET

Providing the Committee with a thorough understanding of your budget and its relationship to your proposed study is an important part of the selection process. Be as detailed as possible in describing how and when you plan to expend funds. If exact costs are not known, providing estimates is also helpful. Here is a link to a document with information regarding Budget Considerations.

PERSONAL BACKGROUND

In the following areas, provide your background information as it relates to the study proposed above. Type your responses and <u>be concise</u>.

EDUCATION (Academic, Music, Technical Training)

WORK EXPERIENCE (Teaching, Research, Employment)

REFERENCES

List names, addresses, phone numbers and e-mail addresses for three references. CONTACT EACH OF THESE REFERENCES and ask that *he/she/they* submit a letter on your behalf, relating specifically to your proposal. If the proposed project is to take place at a site other

than your immediate organization, one letter of reference is required from that site's project supervisor or host institution. Letters must be submitted by **March 1, 2024** to Ronald Barnes Memorial Grant committee: <u>barnes@gcna.org</u>. The committee will only accept electronic submissions.

Reference 1	Name	Address	City	State/Province	Zip/Postal Code/Country
	Phone	Mobile		Email	
Reference 2					
	Name	Address	City	State/Province	Zip/Postal Code/Country
	Phone	Mobile		Email	
Reference 3					
-	Name	Address	City	State/Province	Zip/Postal Code/Country
	Phone	Mobile		Email	

CERTIFICATION

I certify that all information on this form is accurate and complete to the best of my knowledge.

Applicant's Signature (Electronic signature permitted)

Date