***CAC***

***Cable Advisory Council Area 2***

**P. O. Box 603, Orange, CT 06477www.cacarea2.com**

**Fairfield • Bridgeport • Stratford •**

 **Milford • Orange • Woodbridge**

#### Access Grant Application Procedures

**Cablevision of Southern CT Government/Education Access Grants:**

* Fill out the ***CAC*** ***Government/Education Access Funding Grant Application Form*** (can also be downloaded from our website) and indicate what is to be purchased and how it is to be used. Remember: grants are only for E and G access activities, not for web-casting, interactive programs on the I-Net, or other non-Cablevision television activity.

2) Mail all materials to: **Marlene Silverstein, Grant Administrator**

 **860 Shagbark Drive**

 **Orange, CT 06477-1422**

Your materials may be e-mailed to **newgelt@optonline.net.** Please use MSWord or Acrobat format.

1. Expect a response from CAC by 8/15/23.

If CAC anticipates unused funds from the annual $100,000, you may be invited to resubmit for additional funds by 8/30/23. A report on use of your previous grant will be required prior to or with the resubmitted application.

**DUE TO THE LIMITED FUNDS AVAILABLE, GRANT DECISIONS MADE BY CAC ARE BINDING AND FINAL, WITHOUT APPEAL.**

1. Complete a ***Grant Report Form*** by 12/15/23, (sent with your award notification or download from our website) and send it to the CAC grant administrator. Attach copies of all invoices for equipment. If funds were used for purposes other than equipment, you must include in your report how they were spent in accordance with your original application form (i.e. different equipment than originally requested, personnel, etc.).

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### Cablevision Government/Education Access Fund Grant

**Application Form for October 1, 2022-September 30, 2023 GY**

**Application Deadline: 7/15/2023 This application is for a (check one) 🞏 Government/🞏 Education Grant.**

1. **Applicant Information:**

|  |  |
| --- | --- |
| Town/City/School District |  |
| Street Address/Zip Code |  |
| Applicant’s Name |  |
| Title/Position |  |
| E-mail Address |  |
| Phone Number |  |
| Application Date |  |

**2) Project Information:**

|  |  |
| --- | --- |
| Title of project |  |
| Producer/person responsible & Contact Information *(if not same as applicant)* |  |

**2A) List Equipment Request (attach additional page if needed):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Item:** | **Make** | **Model** | **Cost** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| 11 |  |  |  |  |
| 12 |  |  |  |  |
| 14 |  |  |  |  |

**2B) How will this project enhance local access television in your community? *(Attach additional page if needed.)***

1. **Budget**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Expenses** |  | **Income** |
| Equipment |  | CAC Grant Requested |  |
| Materials |  | Contribution provided by town/city/school district |  |
| \*Personnel (total amount) |  | Other grant applications |  |
| Other |  | Private Funding |  |
| **Total Expenses** |  | **Total Income** |  |

*\*During Final Report on Dollars Spent, you will be required to show proof (via town/education budget) as to how much grant funds and how much town/education funds were expended for labor.*

*Cablevision Government/Education Access Fund Grant – 2022-23 Application Form page 2*

**3A) Does your town/city/school district already provide support for access operations? Please describe briefly.**

**3B) Please tell us how you would report personnel expenditures. *(Attach additional page if needed.)***

**4) Supporting Documents Required (disregard this section if all documents are the same as last year; only submit those documents that have changed):**

a. Letter to Sound View

 PA 08-159 stipulates that this grant is for development of programs on town-specific E or G channels. On your initial application, please attach a copy of your letter to Sound View Community Media requesting town specific status for your channel.

Letter from Sound View

Please attach a copy of your letter from Sound View Community Media that grants town-specific status for your channel.

b. Letter to Altice/Optimum

Please attach a copy of your letter to Altice/Optimum requesting your channel be switched from regional status to town specific status.

Letter from Altice/Optimum

Please attach a copy of Altice/Optimum’s response to your request for a switch to town specific status.

c. Policies and Procedures/Bylaws

On your initial application, please attach a copy of your Policies and Procedures or other rules for governance of your E or G channel. A draft version is admissible for the first application. Please update the CAC on your rules as these develop. *A final version must be on file with the Grant Administrator before this section is deemed complete.*

d. Letter from Mayor/First Selectman or Superintendent of Schools (“Mayor”)

 Please attach a letter from the Mayor stipulating a town-sanctioned entity that will represent the town or school system for this grant process. The letter must name the entity, the person authorized to sign and accept the grant on behalf of the town or school system, and contact information.

e. Annual Budget for Town Sanctified Entity

Please attach a copy of the program budget that covers the operating budget for the station.

**5) Town/City/School District Administration Approval:**

|  |  |
| --- | --- |
| Approved by |  |
| Title |  |
| Date |  |

Authorized Signature Date

**Your signature attests that the requested funds will be used for your town or city Government or Education access channel.**

(Signature is not required for e-mail filing, but hard copy must be provided before grant may be approved)

**5) Submission – Please email your completed application to:** **newgelt@optonline.net** **or** Mail your completed application to:

 Marlene Silverstein, Grant Administrator

 860 Shagbark Drive

 Orange, CT 06477

Your materials may be e-mailed to newgelt@optonline.net. Please use MSWord or PDF format.