|            | •                              | Date: July 22, 23, 1986       |     |
|------------|--------------------------------|-------------------------------|-----|
| PANE       | PANEL RECOMMENDATION SHEET     | Program Area:Interdisciplinar | Y   |
|            |                                | <u>Reguest: \$_5,000</u>      |     |
|            | 1986-87                        | Panel.<br>Recommends: \$3,500 |     |
| •          | THE VASULKAS, INC. SPONSORING: |                               |     |
| Applicant. | • Vocal Windows                | No. 86- 125                   |     |
| Project T  | itle: "Vocal Windows"          |                               | ••• |

Reasons for panel recommendation:

The Panel recommends partial funding in the amount of \$3,500 for this project. The Panel noted the caliber and experience of the artists involved in this project to be excellent. In terms of creativity and non-traditional perspectives, the Panel felt that this was one of the best projects it reviewed. The samples were all of top quality.

| Interest regulati | th the Commission's<br>ions, the following p<br>tained from voting of | panelists left  |           | ·     |
|-------------------|---|-----------------|-----------|-------|
| Panel Chairman:   | Joseph Weber  | Alinta          | \$ vote   | 3,500 |
| Panelist          | Estevan Arelland  | Falevettally    | _ \$ vote |       |
| Panelist          | Elizabeth Harris  | - S- LANGEL     | \$ vota   |       |
| Panelist          | Mark Rendleman  | - 4 Mula lindly | ş vote    | -     |
| Panelist          | Susan Zwinger   | Allen Coninger  | _ \$ vota | 3,500 |
| Panelist          |   | (               | _ \$ vote |       |
| Panalist          | · · · ·   |                 | _ \$ vote |       |

8. A. How many artists will participate (employed, trained, etc.) in the Project? / (OR 2)

B. Describe experience and qualifications of personnel administering the Project.

Steina (born in Iceland 1940) has been a seminal force in the development of the electronic arts since 1970, both as co-founder of "The Kitchen", a major exhibition center in New York City, and as a continuing explorer of the possibilities for the generation and manipulation of electronic image through a broad range of technological tools and aesthetic concerns. Her tapes have been exhibited and broadcast extensively in The States and Europe. She has received grants from the N.Y. State Council on the Arts, The NEA and the CPB. Since 1980 she resides in Santa Fe.

C. How many people in the general public (audience, participants, students, excluding employees and/or paid performers) will

benefit directly from the Project? A LARGE AUDIENCE

D. Please outline a project/program schedule indicating start date, significant milestones, such as rehearsal and performance dates, end date, etc.

| SEP-DEC     | 1983 | PHASE | 1:   | IMAGE COLLECTING       |
|-------------|------|-------|------|------------------------|
| JAN-APR     | 1984 | PHASE | II:  | IMAGE/SOUND PROCESSING |
| MAY-JUN     | 1984 | PHASE | III: | EDITING                |
| <u>-105</u> | 1984 | PHASE | IV:  | DISTRIBUTION           |

- E. What criteria will you use to evaluate this project? Who will do the evaluation?
- 1. PAST CRITERIA
- 2. THE PROJECT DIRECTOR

9. ORGANIZATION INFORMATION

A. When founded? 1975

**B.** Principal Activities and Function: To facilitate research into technological processes of sound and image forming, directed toward their utilization and aplication on temporary arts, for the cultural benefit of the public. To conduct research into concepts and designs of electronic art tools, audio and video synthesizers and their computer control. To serve as resource of electronic arts publication and general art policy-setting. To establish, maintain, support, and administer the study of, and research into codes and modes of media by which men comunicate art for the various codes and modes of media by which men comunicate and interface with their environments.

D. Number of artists participating in organization's activities during previous year: <u>//</u>

- E. Number of individuals benefiting (audience, students, etc.) from organization's activities during previous year: 7.1., CABLE
- F. Number of volunteers during previous year:\_\_\_\_\_
- 10. DESCRIBE THE ROLE THE APPLICANT ORGANIZATION WILL HAVE FOR THIS PROJECT, IF ACTING AS SPONSOR.

NEW MEXICO ARTS DIVISION 113 Lincoln Avenue Santa Fe, New Mexico 87501

### CASH REQUEST FORM

NMAD GRANT NO. 82-203

Fed. Employer I.D. No. 16-1086752

Cash Request No.

Name and Address of Grantee The Vasulkas, Inc., Rt. 6, Box 100, Santa Fe, NM 87501 1.

Project Title \_\_\_\_\_ The Commission \_\_\_\_\_ 2.

Grant Period \_\_\_\_\_8/1/82 - 8/31/83 \_\_\_\_\_ 3.

5. Matching Pledged by Grantee \$ 66,494 Amount of NMAD Cash Grant <u>\$8806</u> 4.

Fiscal Summary: 6.

|                      | Total NMAD<br>Cash Grant   | Present<br>Cash Request  | Previous<br>Cash Requested  | Cash Remaining<br>In Grant  |
|----------------------|--|--|---|---|
| ISTIC EXPENSE        |  |  |   |   |
| Personnel            |  |  |   |   |
| Supplies & Materials |  |  |   |   |
| Equipment Rental     |  |  |   |   |
| Equipment Purchase   |  |  |   |   |
| Travel               |  |  |   |   |
| INISTRATIVE EXPENSE  |  |  |   |   |
| Personne1            |  |  |   |   |
| Promotion & Adver.   |  |  |   |   |
| Printing             |  |  |   |   |
| Supplies             |  |  |   |   |
| Rental/Facilities    | 8806   |  |   |   |
| OTHER                |  |  |   |   |
| AL EXPENSE           | .8806  |  |   |   |
|                      | Supplies & Materials<br>Equipment Rental<br>Equipment Purchase<br>Travel<br>MINISTRATIVE EXPENSE<br>Personnel<br>Promotion & Adver.<br>Printing<br>Supplies<br>Rental/Facilities | Cash GrantISTIC EXPENSEPersonnelSupplies & MaterialsEquipment RentalEquipment PurchaseTravelINISTRATIVE EXPENSEPersonnelPromotion & Adver.PrintingSuppliesRental/Facilities8806OTHER | Cash GrantCash RequestISTIC EXPENSEPersonnelSupplies & MaterialsImage: Cash RequestEquipment RentalImage: Cash RequestEquipment RentalImage: Cash RequestEquipment PurchaseImage: Cash RequestTravelImage: Cash RequestMINISTRATIVE EXPENSEImage: Cash RequestPersonnelImage: Cash RequestPromotion & Adver.Image: Cash RequestSuppliesRental/FacilitiesRental/Facilities8806OTHERImage: Cash Request | Cash GrantCash RequestCash RequestedISTIC EXPENSEPersonnelSupplies & MaterialsEquipment RentalEquipment PurchaseTravelNINISTRATIVE EXPENSEPersonnelPromotion & Adver.PrintingSuppliesRental/Facilities8806OTHER |

7. Matching Funds to be provided with current cash request \$\_\_\_\_\_

- Cumulative Matching Funds provided to date \$\_\_\_\_\_ 8. (This figure should include the matching funds provided with this request)
- Please attach a concise narrative progress report on project activities to date. 9.
- Certification: I certify that the above information is true and correct, and that all 10. expenditures were incurred solely for the purposes of the above grant, during the grant period, and in accordance with the agreed conditions of the grant. Also, if the amount of funds received (as per this cash request) is less than \$10,000, it will be disbursed within 30 calendar days; if in excess of \$10,000, it will be disbursed within  $\underline{7}$  calendar  $\overline{days}$ .

Signature of Project Director or Fiscal Officer Date \_\_\_\_\_

Approved:\_\_\_\_\_\_\_Date:\_\_\_\_\_BSOG·GRANT NO. 22-6141-034

22-6141-034 BSG GRANT NUMBER 16-1086752

FEDERAL EMPLOYER ID NUMBER

# GRANT AGREEMENT NEW MEXICO ARTS DIVISION

| The Vasulkas, Inc.   | ,(hereinafter      |
|--|--------------------|
| known as the grantee), hereby signified its acceptance of a project  | grant in the       |
| amount of \$ 8806 , Grant Number 82-203 , from t                     | he New Mexico Arts |
| Division (NMAD). The grantee agrees to provide matching funds in t   | he amount of at    |
| least \$ <sup>8806</sup> , either in cash or in-kind, for a total pr | oject cost of at   |
| least \$17.612 . The grant period will extend from8/1/9              |                    |
| 8/31/83 .  |                    |

THE GRANTEE SHOULD UNDERSTAND THAT ACCEPTANCE OF AN AWARD CREATES A LEGAL DUTY ON THE PART OF THE GRANTEE TO USE FUNDS IN ACCORDANCE WITH THE TERMS OF THE GRANT AND TO COMPLY FULLY WITH ALL PROVISIONS AND CONDITIONS.

THE COMPLETED GRANT AGREEMENT, LABOR ASSURANCE FORM, AND PROJECT SCHEDULE MUST BE RETURNED TO THE NMAD BEFORE CASH REQUESTS WILL BE HONORED.

The grantee agrees to administer the grant in compliance with the following provisions:

A. Cost Principles

Only those costs set forth in the project budget, as approved by the New Mexico Arts Division will be charged to this grant.

- 1. Capital items: No funds from this grant will be used to purchase capital items i.e., land, buildings, office equipment or other equipment, without prior written approval from the New Mexico Arts Division.
- 2. Per Diems: Per diems shall not exceed \$36<sup>(\*)</sup>Less than one full per diem is divided into quarters. One night's lodging is one half a per diem. All motel and hotel receipts must be maintained by the grantee.
- B. Cash Requests
  - 1. Requests may be made as needed but not to exceed the balance of the total grant, less twenty (20%) percent. Three weeks time is needed to process cash requests. The final twenty (20%) percent will be payable upon receipt of the final report and then only on the basis of claims outstand-ing. Exceptions must be approved by the NMAD.
  - 2. No less than two (2) cash requests shall be made within the grant period. A brief narrative report shall accompany each cash request.
  - 3. Cash request forms, furnished by the NMAD, must be completed and submitted to the Division office in order to obtain funds. The <u>final</u> cash request must be postmarked no later than July 31 of next year; otherwise, without exception, remaining funds relative to your grant will be redistributed by the Division. No expense may be incurred after the closing date of the grant period.
    - (\*) Per diem for Farmington, Santa Fe, Taos and Albuquerque shall not exceed \$44.

- 4. The United States Department of the Treasury requires that cash advances to recipient organizations be limited to minimum amounts needed and be timed to meet actual immediate cash requirements to carry out the purposes of approved programs or projects. The timing and amount of cash advanced should be as close as is administratively feasible to actual disbursements by recipient organizations for the NMAD's share of allowable project costs. If the amount of funds received (per cash request) is less than \$10,000, it must be disbursed within 30 days; if in excess of \$10,000, it must be disbursed within seven calendar days.
- 5. In the case of a sponsoring organization, <u>all checks from the NMAD will</u> be made payable to the Sponsor.
- C. Grant Accounting, Records and Reports
  - 1. The grantee agrees to maintain records and accounts consistent with generally accepted accounting principles, and also agrees to provide for such fiscal control and fund accounting procedures as are necessary to assure proper disbursing of, and an accounting for, project grant funds.

a) The grantee certifies that accounts and supporting documentation (cancelled checks, receipts, vouchers, original invoices, sales slips, cash register tapes, etc.) relating to project expenditures will be adequate to permit an accurate and expeditious audit. An audit may be made at any time by the NMAD, its fiscal agent, or any applicable agency of the United States Government.

b) The grantee will maintain and keep intact records and accounts for this project grant for a period of not less than three (3) years.

- 2. The grantee agrees to maintain and keep intact records to demonstrate that matching and cost sharing contributions are not less than the amount indicated above, or any revision thereof which is approved by the NMAD. It further agrees to secure and to maintain reasonable written proof of both the value and type of "in-kind" contributions to the project grant.
- 3. <u>Periodic Reports</u>: Grantees will submit reports of expenditures and such other financial and descriptive reports as the NMAD may require on the appropriate forms.
- 4. <u>Final Reports</u>: Within thirty (30) days after the completion of the project, the grantee is required to submit a final financial report and a descriptive report, stating what was accomplished through the grant. The financial portion must include copies of all spread sheets or similar records which document the expenditure of both NMAD funds and matching funds.
- D. Limitations on the Use of Grant Funds
  - 1. Grant funds may be expended only for project purposes and activities set forth in the budget as originally approved or subsequently amended.
  - 2. Proposed amendments must be submitted by the grantee's authorizing official for written approval from the NMAD. Significant changes

requiring such action include:

- a) Changes in project scope, purpose of activities;
- b) Changes in the project director or other key professional personnel identified in the approved application;
- c) Changes in the project budget which exceed the specified amount in any budget line item, or which introduce or eliminate types or categories of expenditures;
- d) Decreases in the level of grant-matching.

<u>PLEASE NOTE</u>: In the case of sponsorship, any proposed amendments must come through the sponsor since the sponsor is the legal grantee.

## E. Misapplied Funds

- 1. In cases where funds are determined by the NMAD to have been misapplied by the grantee, the NMAD has an ownership interest in all such funds or property acquired through the use of such funds. Misapplied funds shall be repaid to the NMAD.
- F. Uncommitted Funds
  - 1. Grant funds, and/or such matching funds as are required, must be spent during the grant period.
  - 2. Funds remaining uncommitted at the termination of the grant period must be returned with the final financial report, by check made payable to the NMAD.

## G. Publication and Acknowledgement of the New Mexico Arts Division

- The grantee may publish, without charge to the grant funds, the results of grant activities, provided that such publications (written, visual or sound) contain an acknowledgement of grant support by the NMAD and the National Endowment for the Arts. Publications must include, in an appropriate place, the statement that "The findings, conclusions, etc., do not necessarily reflect the view of either the New Mexico Arts Division or the National Endowment for the Arts."
- 2. Any tangible result of the grant activity (production, displays, exhibits, etc.) must bear an acknowledgement of support by the New Mexico Arts Division and the National Endowment for the Arts. The NMAD can make whatever use of the materials it deems proper.
- 3. All publicity, visual and oral, by the grantee organization concerning the above project shall state:

This project is funded in part by a grant from the New Mexico Arts Division and the National Endowment for the Arts.

This shall include all printed programs, posters, playbills, announcements, and releases to the news media, etc. In public releases, please include the statement "early" in the release; otherwise, it may be omitted by the editing of others.

<u>Please note</u>: It is not sufficient to merely list the NMAD and the National Endowment for the Arts as contributors along with all other contributors, sponsors, or patrons.

### H. Copyright

1. The government reserves a non-exclusive license to use and reproduce for government purposes, without payment, any publishable matter, including copyrighted matter, resulting from the grant activities.

## I. The Termination of Grants

- The NMAD may terminate any grant, in whole or in part, at its discretion and at any time, on ten (10) days' written notice, after consultation with the grantee. Such termination shall not affect any commitment which, in the judgment of the NMAD, had become final prior to the effective date of termination.
- 2. The grantee agrees to furnish the NMAD an itemized accounting of funds expended, obligated, and remaining under the grant within thirty (30) days of the date of termination. The grantee agrees also to remit, within thirty (30) days of the receipt of a written request, any amount found due.

### J. A Note About Sponsors

- 1. The Grant Agreement is between the NMAD and the Sponsor, who is held primarily responsible for fulfilling the terms of the Grant Agreement.
- 2. Sponsors, in turn, are advised to have a clear, written agreement with the organization or individual they are sponsoring as to their mutual obligations to each other with respect to this Grant Agreement.
- 3. Organizations being sponsored are urged to stay in close contact with their sponsor, keeping them current on project activities. Any changes to or modifications of the project must be communicated to the sponsor as well as to the NMAD.

(4)

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\* \* \* \* \* \* \* \*

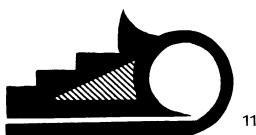
The grantee certifies that it is a non-profit organization entitled to tax-exempt status, and that it will administer the grant in compliance with the provisions of Title VI of the Civic Rights Act of 1964 (42 USC 2000d et.seq.), Section 504 of the Rehabilitation Act of 1973 (29 USC 794) and, where applicable, Title IX of the Education Amendments of 1972 (20 USC 1681, et.seq.).

Title VI of the Civic Rights Act of 1964 bars discrimination or exclusion from the program on the grounds of race, color or national origin. Section 504 of the Rehabilitation Act of 1973 provides for non-discrimination in federally assisted programs on the basis of handicap. Subject to certain exceptions, Title IX of the Education Amendments of 1972, prohibits the exclusion of persons on the basis of sex in any education program or activity receiving federal financial assistance. The Applicant hereby gives assurance that it will immediately take any measures necessary to comply.

This assurance shall obligate the Applicant for the period during with the federal financial assistance is extended. Also, this assurance is given in connection with any and all financial assistance received from the Endowment after the date this form is signed. This includes payments after such date for financial assistance approved before such date. The Applicant recognizes and agrees that any such assistance will be extended in reliance on the representations and agreements made in this assurance, and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant, its successors, transferees, and on the authorized official whose signature appears below.

| DATE:                         | -                                      | Signed:             | Project Director                     |
|-------------------------------|--|---------------------|--------------------------------------|
|                               | •••••••••••••••••••••••••••••••••••••• | Address: _          |                                      |
|                               |  | DI                  | Zip:                                 |
| DATE:                         | <b>-</b>                               | Signed:             | Chief Administrative Officer         |
|                               |  | Address:            |                                      |
|                               |  |                     | Zip:                                 |
| Check to be made payable to:  | (*)                                    |                     |                                      |
| Check to be mailed to:        | Title:                                 |                     |                                      |
|                               | Address:                               |                     | Zip:                                 |
| DATE:                         | -                                      | Signed:             |                                      |
|                               |  |                     | Director<br>New Mexico Arts Division |
| (*) In the case of a sponsori | ng organiza                            | tion, <u>checks</u> | must be made payable to and          |

mailed to the sponsoring organization.



# New Mexico Arts Division

113 Lincoln Avenue

Santa Fe, New Mexico 87501

(505) 827-2061

September 22, 1981

Steina Vasulka, Project Director VASULKA CORPORATION 1600 Old Pecos Trail Santa Fe, New Mexico 87501

Dear Ms. Vasulka:

RE: NMAD #81- 183

The New Mexico Arts Division is pleased to inform you that your project, "South Western Landscapes," has been awarded partial funding in the amount of \$2,000, as recommended by the Panel.

Due to partial funding, project revisions are necessary prior to the issuance of the Grant Agreement and accompanying funding packet. Budget revisions may be either increases in cash or in-kind matching, reduction in project costs, or both. If project costs are reduced, the percentage of NMAD support should remain the same as in the original application.

We enclose an application such as you originally submitted, which is to be filled out with the revised information and returned to the Arts Division. The new project description should indicate what changes, if any, will occur in project activities; the new project budget page and new budget breakout page(s) are to reflect revisions in the budget.

When the revised application is received and approved, we will send you a Grant Agreement for signature and a Fiscal Packet for your careful study and use. Please return the pertinent information as soon as possible. NO PROJECT ACTIVITY MAY BEGIN UNTIL THE REVISED APPLICATION IS RECEIVED.

If you have questions about your grant, please do not hesitate to call this office. Our Grants Coordinator, Tisa Gabriel, will be glad to work with you on any problems that may arise.

Sincerely. Bernard B Director

bbl;peg enc.

# **NEW MEXICO ARTS DIVISION**

|  | 2. Name of Actual Project Organization (if sponsored): |
|--|--|
| 1. Name of Applicant Organization or Sponsor:<br>VASULKA CORPORATION   | SAME   |
| Permanent Mailing Address:   | Permanent Mailing Address:                             |
| 1600 OLD PECOS TRAIL   |  |
| Phone: 505-983.8128  | Phone:   |
| County: SANTA FE COUNTY  | County:  |
| Legislative District:  | Legislative District:                                  |
| House 25 Senate 47   | HouseSenate  |
| Is Tax Determination Letter Included?  |  |
| Internal Revenue Service Employer Identification Number 16   | -1086752   |
|  |  |
| 3. PROJECT TITLE SOUTH WESTERN LAN   |  |
| 4. Amount Requested from NMAD: \$_3,000 Sta  | irt Date: 9-1-8/ End Date: 8-3/-82                     |
| 5. PROJECT DESCRIPTION (Complete in space provided. Do NOT c   | ontinue on separate sheet.)                            |
| a. PROJECT OBJECTIVES (State simply what you wish to accord  | nplish with this project)                              |
| A 30 MIN TAPE OF BROAD   | CAST QUALITY   |
|  |  |
| DÉVICES WITH POP<br>VIDÉO TAPÉ RECON<br>PHASE II: ELECTRONIC PROCI<br>BOTH ANALOG AND  | ESSING OF THIS MATERIAL BY<br>DIGITAL NEAÑS•           |
| PHASE III: EDITING/TITLING<br>Phase IV: Copying and Dist   | ETC TO A 30 MIN. MASTER                                |
| ART INSTUTIONS,  | UNIVERSITIES, LIBRARIES, ETC.                          |
| LOCATIONS BEING CONSIDERED   |  |
|  | •  |
| RIO GRANDE GORGE   |  |
| INDIAN RUINS (BANDELIER)   |  |
| ŜPANISH RUINS (QUARAI)   | ·  |
| ŠPANISH RÚINS (QUARAI)   | OPE (PLAINS OF ST. AUGUSTINE)                          |
| ŜPAÑISH RÚINS (QUARAI)<br>The V+L+A+ Radio Telesco   | OPE (PLAINS OF ST. AUGUSTINE)                          |
| ŜPAÑISH RÚINS (QUARAI)<br>The V+L+A+ Radio Telesco   | OPE (PLAINS OF ST. AUGUSTINE)                          |
| ŜPAÑISH RÚINS (QUARAI)<br>The V·L·A· Radio Telesco   | OPE (PLAINS OF ST. AUGUSTINE)                          |
| ŜPAÑISH RÚINS (QUARAI)<br>The V·L·A· Radio Telesco   | OPE (PLAINS OF ST. AUGUSTINE)                          |
| ŠPAŇISH RÚINS (QUARAI)<br>The V·L·A· Radio Telesc(<br>Townscapes (Santa Fe/Ta)   | OPE (PLAINS OF ST. AUGUSTINE)<br>DS)                   |
| SPANISH RÚINS (QUARAI)         THE Ü·L·A· RADIO TELESC         TOWNSCAPES (SANTA FE/TA)         6. Would you be interested in continuing this project if Partial Func- | OPE (PLAINS OF ST. AUGUSTINE)                          |

7. If partial funding is necessary, indicate what changes will have to be made in the project activities and in the project budget.

THE WORK WOULD NOT BE OF LOWER QUALITY, BUT SHORTER. PROPOSED NOW & 39 MIN. WORK FOR \$6,999. IF CUT, IT COULD BE 29 MIN. WORK FOR \$4,999, OR 19 MIN. WORK FOR \$2,999. ETC.

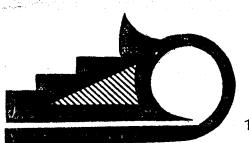
|                                     |                    | PROJECT BL   | JDGET ONLY        |  |   |
|-------------------------------------|--------------------|--|-------------------|--|---|
|                                     | REQUEST OF<br>NMAD | IN-KIND<br>MATCH   | CASH<br>MATCH     | PROJECT<br>TOTAL                                 | PROJECT CASH SOURCES<br>Earned Income: 1, 000.  |
| ARTISTIC EXPENSE<br>Personnel       |                    | 1000   | 3000              | 4000   | Contributions: <u>2, 000.</u><br>Private Foundation<br>Grants*:                         |
| Supplies and materials              | 500                |  |                   | 500  | City or County  |
| Equipment Rental                    | 1500               | 1500   |                   | 3000   | Funds:  |
| Equipment Purchase                  |                    | 11500  |                   |  | Other Federal   |
| Travel                              | 300                |  |                   | 300  | Grants*:  |
| ADMINISTRATIVE EXPENSE<br>Personnel |                    |  |                   |  | NMAD: 3, 000<br>TOTAL CASH INCOME   |
| Promotion & Adv.                    | 260                |  |                   | 200  | FOR PROJECT: 6, 000.  |
| Printing                            |                    | ÷ 9.   |                   |  | *Specify Source   |
| Supplies                            |                    |  |                   |  |   |
| Rental/Facilities                   | 500                | 500  |                   | 1000   |   |
| OTHER                               |                    |  |                   |  | •   |
| TOTAL EXPENSE                       | 3000               | 3000-  | 3000              | 9000   |   |
|                                     |                    | ANIZATIONAL TO   |                   |  | 1   |
| A. EXPENSES                         | Next Fi            | mate for<br>iscal Period<br>- <u>8/</u> To: <u>3·3/·82</u> | From: <u>4-1-</u> | iscal Period<br><i>80</i> To: <u>3-3 / • 8</u> / | Most Recent<br>Completed Fiscal Period<br>From: <u>9 -1 - 79</u> To: <u>3 - 31 - 80</u> |
| Artistic Expenses                   | 3535               | 0  | 16,27             |  | 20,251.50   |
| Administrative Expenses             | 657                | 0  |                   | 7.40   | 627.24  |
| TOTAL                               | 36,00              | 0. –   | 16,92             | <u> </u>   | 20,878.74   |
| B. REVENUES<br>Earned Income        | 5,00               | 00   | 4,99              | 861  | 3,747   |
| Contributions                       | 3,00               | 50   |                   | -  |   |
| Private Foundation Grants           |                    |  |                   | ·····  |   |
| City or County Funds                |                    | 00   |                   |  |   |
| Federal Grants                      | 45,00              | 50   |                   | <u></u>  | 10,000  |
|                                     | 3/ -               | rrt)   | 16 0 0            | 961  |   |
| Other N.Y. STATE<br>TOTAL           |                    | 00   | 7,60              | -0   | 8,000<br>21,747   |

and a second sec

| <ol> <li>Have you filed a copy of this application with your loc<br/>(See list in Guidelines).</li> </ol>                        | al Community Arts Agency? YES  |
|--|--|
| 12. A. Do you have any other applications <i>currently on file</i><br>(If the answer is YES, list below, giving project title    | e with the New Mexico Arts Division?   |
|  |  |
| B. Please indicate the order of priority your organization (See the Guidelines on Multiple Project application)                  | on has established for applications currently on file.<br>s.)  |
|  |  |
| C. In addition to applications already on file, do you int   | tend to apply for additional NMAD grant assistance? Please specify.  |
| in an  | A set of the set of th |
| <ul> <li>D. Have you applied in previous years to the NMAD for each of the past five years.</li> </ul>                           | r funding? If so, list project titles, years applied, and amount of funding (if any) for   |
|  | an an Singhan (1999)<br>Shangar (1997)<br>Shangar (1997)<br>Shangar (1997)<br>Shangar (1997)<br>Shangar (1997)<br>Shangar (1997)   |
|  |  |
| <ul> <li>istered by and under supervision of the Applicant; (2) funds</li> </ul>   | Sem Valuka<br>Project Director   |
| Address and Phone 7838/25<br>Address and Phone 7838/25<br>Please indicate the name and phone no. of someone<br>STEINA 92<br>Name | Address and Phone <u>983.8/28</u><br>NM FE <u>1600 OLD PELOS TR, SANTA FE</u><br>e who can be readily contacted regarding any questions about this application<br>838/28<br>Phone  |
|  |  |

|  |                      | ·   |                                   | ·····                                 | ,<br>  |
|--|----------------------|---|-----------------------------------|---------------------------------------|--|
|  |                      | PROJECT B   | UDGET ONLY                        |                                       |  |
|  | REQUEST OF<br>NMAD   | IN-KIND<br>MATCH                                    | CASH<br>MATCH                     | PROJECT<br>TOTAL                      | PROJECT CASH SOURCE<br>Earned Income: 1.000  |
|  |                      |   |                                   |                                       | Contributions:   |
| ARTISTIC EXPENSE<br>Personnel  |                      | 1.000   | 1,000                             | 2,000                                 | Private Foundation<br>Grants*:   |
| Supplies and materials   | 300                  |   |                                   | 300                                   | City or County   |
| Equipment Rental   | 1,000                | 1,500   |                                   | 2,500                                 | Funds:   |
| Equipment Purchase   |                      |   |                                   |                                       | Other Federal  |
| Travel   | 2.00                 |   |                                   | 200                                   | Grants*:   |
| ADMINISTRATIVE EXPENSE<br>Personnel  |                      |   |                                   |                                       | NMAD: 2,000<br>TOTAL CASH INCOME   |
| Promotion & Adv.   |                      |   |                                   |                                       | FOR PROJECT: 3, out  |
| Printing   |                      |   |                                   | · · · ·                               | ] *Specify Source  |
| Supplies   |                      |   |                                   | ·                                     |  |
| Rental/Facilities  |                      |   |                                   | 1,000 -                               | ]  |
| OTHER  | 500                  | 500   |                                   |                                       | ]  |
| TOTAL EXPENSE  | 2,000                | 3,000   | 1,000                             | 6,000                                 |  |
| the base for a second standard and a second of the second states and the second states and the second states a |                      |   |                                   |                                       |  |
|  | ORG                  | ANIZATIONAL T                                       | DTAL FISCAL AC                    | TIVITY                                |  |
| A. EXPENSES  | Next Fi              | mate for<br>scal Period<br><u>- 8/ To: 3-3/ -82</u> | PRELIM<br>Current F<br>From: 4-1- | iscal Period<br>80To: <u>3-31-8</u> / | Most Recent<br>Completed Fiscal Period<br>From: <u>4 - 7-79</u> To: <u>3 · 3 / - 8</u> |
| Artistic Expenses  | 35350                | <b>)</b>  | 16,27                             | 6.17                                  | 20,251.50  |
| Administrative Expenses  | 657                  |   | 64                                | 7.40                                  | 627.24   |
|  | 26 000               | o. –  | 16,92                             | 357                                   | 20,878.74  |
| TOTAL  | 10,00                |   |                                   |                                       |  |
| TOTAL<br>B. REVENUES<br>Earned Income  | 5,00                 |   | 4,99                              | 1861                                  | 3,747  |
| TOTAL<br>B. REVENUES<br>Earned Income<br>Contributions   | 5,00                 |   | <u> </u>                          | 18,61                                 | 3,747  |
| TOTAL<br>B. REVENUES<br>Earned Income<br>Contributions<br>Private Foundation Grants                            | 5,07                 | 50<br>150   | 4,99                              | 18,61                                 | 3,747  |
| TOTAL<br>B. REVENUES<br>Earned Income<br>Contributions<br>Private Foundation Grants<br>City or County Funds    | 5,00<br>3,00<br>3,00 | 50<br>50<br>50                                      |                                   |                                       |  |
| TOTAL<br>B. REVENUES<br>Earned Income<br>Contributions<br>Private Foundation Grants                            | 5,07                 | 50<br>50<br>50                                      | 5.00                              | 1861<br>                              | 3,747<br>10,000<br>8,000   |

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# New Mexico Arts Division

113 Lincoln Avenue

Santa Fe, New Mexico 87501

(505) 827-2061

## MEMORANDUM

TO: ALL MEDIA ARTS APPLICANTS

FROM: Tisa Gabriel, Grants Coordinator

RE: MEDIA ARTS PANEL RECOMMENDATIONS

DATE: July 27, 1981

Attached is a copy of the Media Arts Panel's recommendation on your grant application. Let me stress that this is a recommendation only -- the full Commission will review the panel's findings at its August meeting and will then make recommendations to the Director on the funding of projects in the Media Arts category.

This meeting is open to the public. It will be held on Wednesday, August 5, 1981, at 9:30 A.M., in the Pajarito Room of the Fuller Lodge, Los Alamos, New Mexico.

Attendance at the meeting is not required and your funding request will not be affected in any way by your presence or absence.

If you have any questions, please feel free to call me.

| PANEL RECOMMENDATION SHEET<br>1981-82 FY-70  | Request \$3,000                        |
|--|--|
| 1701-02 1  | Panel Recommends \$ 2,000              |
|  |  |
| Applicant VASULKA CORPORATION  | <u>#81-183</u>                         |
| Project Title "Southwestern Landscapes"  |  |
| Was representative of applicant called upon? NO  | If so, who?                            |
|  |  |
| Reasons for panel recommendation:  | this notions assist                    |
| The panel recommended-partial funding for t<br>that the sample work submitted was interest |  |
| quality  |  |
| The amount requested is small and the proje  | act is creative. Me Vasulka            |
| is a professional artist with a good histor  | · · · · · · · · · · · · · · · · · · ·  |
| project is certainly worthy of support.  |  |
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|  |  |
|  | •                                      |
|  |  |
|  |  |
| In compliance with the Commission's Conflict of  |  |
| interest regulations, the following panelists left   |  |
| the room and abstained from voting on this application                                     |  |
| Panel Chairman   | \$ vote 1 000                          |
| PATTO  |  |
| Panelist A. H. K.  | \$ vote 2,000                          |
| Panelist Sectientlestreinen  | \$ vote 3,000                          |
| Panelist AW Monthly  | s vote 2,000                           |
| (Y) RD,  |  |
| Panelist Joachim A.g. Alas   | _\$ vote_2,000                         |
| Panelist .   | \$ vote                                |
| Panelist   | \$ vote                                |
| Panelist   | \$ vote                                |
|  |  |

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ļ, 17.

| Name of Applicant (or Sponsor):       2.         THE       VASULKAS, /N/C         Permanent Mailing Address:       .         RTG, BOX / 00       .         City:SANTA FE State:       N.M. Zip Code: § 750/   | Name of Project Organization (if sponsored):<br>Permanent Mailing Address:   |
|---|--|
| RTG, BOX 100  | •  |
| City: SANTA FE State: N.M. Zip Code: 87501  |  |
|   | City:State:Zip Code:   |
| elphone: 505 473 06/4   | Telephone:   |
| County of Applicant: SANTA FE   | County of Project Organization:  |
| egislative District of Applicant:   | Legislative District of Project Organization:  |
| louse <u>46</u> Senate <u>25</u>  | HouseSenate  |
| Congressional District of Applicant:  | Congressional District of Project Organization:  |
| Federal Employer Identification Number <u>\$50300025</u>  | NEW MEXICO   |
| •   |  |
|   |  |
| Grant Amount Requested from NMAD: \$ 3,500 Sta  | art Date: 9-1-83 End Date 8-3/-84  |
| PROJECT DESCRIPTION (Complete in space provided. Do NOT   | Γ continue on separate sheet.)   |
| a. PROJECT OBJECTIVES (State simply what you wish to account of the second state of | omplish with this project.)  |
| To produce a video tape of broadcast quality, using a camera<br>as well as speed programmed pan/tilt/zoom, for repeating exac   | with switching for up/down, right/left,<br>ct image movements in various locations.  |
| b. PROJECT ACTIVITIES (Describe how the objectives will be r  | realized.)   |
| I am seeking financial assistance to continue my series of mechanic* vision, as represented in the video tapes submitte   | explorations into opto-electro- '  |
| <pre>* Opto = optical treatment of camera image through lenses an<br/>* Electro = electronic manipulation of image on location by<br/>or during post-production by analog or digital (computer)<br/>* Mechanic = mechanized movement of the camera, lenses, mirr</pre>  |  |
| For this new tape, I need to have designed and constructed<br>pan/tilt head. Both would use steppermotors with a battery o<br>able pan/tilt/zoom enables exact reproduction of image movem<br>mixing or layering.   | operated digital programmer. The program-  |
| This tape, tentatively titled "Explorations", would be shot<br>The Ski Basin, Abiquiu, Bisti Badlands, ETC, and would be of   | in various parts of New Mexico:<br>30 min. duration.   |
|   | Congressional District of Applicant: <u>3</u><br>Federal Employer Identification Number <u>\$50300025</u><br>PROJECT TITLE <u>\$XPLORATIONS</u><br>Grant Amount Requested from NMAD: \$ <u>3,500</u> St<br>PROJECT DESCRIPTION (Complete in space provided. Do NOT<br>a. PROJECT OBJECTIVES (State simply what you wish to accord<br>to produce a video tape of broadcast quality, using a camera<br>as well as speed programmed pan/tilt/zoom, for repeating exact<br>D. PROJECT ACTIVITIES (Describe how the objectives will be not<br>the seeking financial assistance to continue my series of<br>mechanic* vision, as represented in the video tapes submitter<br>* Opto = optical treatment of camera image through lenses an<br>* Electro = electronic manipulation of image on location by<br>or during post-production by analog or digital (computer)<br>* Mechanic = mechanized movement of the camera, lenses, mirr<br>For this new tape, I need to have designed and constructed<br>pan/tilt/zoom enables exact reproduction of image movem<br>mixing or layering.<br>This tape, tentatively titled "Explorations", would be shot |

6. Would you be interested in doing this project if partial funding is necessary? YES \_\_\_\_\_At what funding level could the pro-

ject continue without seriously lowering its quality? 2, 500 (If desired, further explanation may be supplied on separate sheet.) NOT APPLICABLE FOR MINI-GRANT APPLICATION OR APPLICATIONS FOR GENERAL OPERATING SUPPORT.

7. If partial funding is necessary, indicate what changes will have to be made in the project activities and in the project budget. For \$3,500 I would be able to make a 30 min. work. For \$2,500 I would be able to make a 15 min. work.

- 8. A. How many artists will participate (employed, trained, etc.) in the Project? / (OR
  - B. Describe experience and qualifications of personnel administering the Project.

Steira (born in Icelard 1948) has been a seminal force in the development of the electronic arts since 1970, both as co-founder of "The Kitchen", a major exhibition center in New York City, and as a continuing explorer of the possibilities for the generation and manipulation of electronic image through a broad range of technological tools and aesthetic concerrs. Her takes have been exhibited and broadcast extensively in The States and Europe. She has received grants from the N.Y. State Douncil on the Arts, The NER and the CPE. Since 1960 she resides in Santa Fe.

C. How many people in the general public (audience, participants, students, excluding employees and/or paid performers) will by work is distributed by Electronic Arts Internix (NG), Video Data Bank (Chicago), Lordon Video Arts (England) and Paris Film Co-op (France). They distribute to Musea,

benefit directly from the Project? <u>Balleries, Universities, Media C</u>enters and occationally to Cable and T.V.

2

D. Please outline a project/program schedule indicating start date, significant milestones, such as rehearsal and performance dates, end date, etc.

| SED-DEC. | 1937 | 2H96F 11   | Tweet CETEC ING        |
|----------|------|------------|------------------------|
| TAN-OPS  | 1984 | PHASE 11:  | IMAGE/SOUND PROCESSING |
|          |      | PHASE III: |                        |
| JLL-     | 1984 | PHASE IV:  | DISTRIBUTION           |

- E. What criteria will you use to evaluate this project? Who will do the evaluation? THE PROJECT DIRECTOR, THE VIEWING AUDIENCE, PRESS REVIEWS.
- 9. ORGANIZATION INFORMATION
- A. When founded? / 0175
- B. Principal Activities and Function:

To facilitate research into technological processes of sound and image forming, directed toward their utilization and aplication on temporary arts, for the cultural benefit of the public. To conduct research into concepts and designs of electronic art tools, audio and video synthesizers and their computer control. To serve as resource of electronic arts publication and general art policy-setting. To establish, maintain, support, and administer the study of, and research into all the various codes and modes of media by which men comunicate and interact with each other and with their environments.

- C. Geographical area served. PRIMARILY NEW MEXICO SECONDARILY THE U.S.
- D. Number of artists participating in organization's activities during previous year: 📈
- E. Number of individuals benefiting (audience, students, etc.) from organization's activities during previous year: <u>SEE 8C</u> ABOVE
- F. Number of volunteers during previous year:
- 10. DESCRIBE THE ROLE THE APPLICANT ORGANIZATION WILL HAVE FOR THIS PROJECT, IF ACTING AS SPONSOR.

B. Please indicate the order of priority your organization has established for applications currently on file. (See the Guidelines on multiple project applications.)

| 1. PERSPECTIVES/RETROSPE  | CTIVES 1983  |
|---|--|
| 2. MARGINAL WORKS   |  |
| 3. EXPLORATIONS   |  |
| <ul> <li>Has your organization applied in previous years to the NM award (if any) for each year of the past three years.</li> <li>Year Project Title</li> </ul>   | AD for funding? If yes, list project titles, years applied, and grant<br>$\frac{$ Grant Award}{2,000}$<br>ission" $8,8063,500$   |
| ASSURANCES: If grant is awarded, applicant must give assition will be administered by and under supervision of the App project; (3) Applicant has read and will conform to the NMAD tion, and (4) that filing of this application has been authorized mutually agreed that all parties shall comply with Title VI of t tion (i) and (j) of the National Foundation on the Arts and H 1973; and Title IX, where applicable.<br>Signature of Authorizing Official<br><i>B. WOODY MASULKA</i><br>Typed Name of Authorizing Official<br>Address and Telephone <i>SOS</i> . 473-0614 | licant; (2) funds received will be used soley for the described<br>'s general guidelines, application instructions and informa-<br>ed by the governing body of the applicant organization. It is<br>he Civil Rights Act of 1964; Fair Labor Standards under Sec- |
| Please indicate the name and phone no. of someone w about this application:   | ho can be readily contacted regarding any questions  |
| STEINA VASULKA  | 473.0614   |
| Contact Person(s)   | Telephone  |
|   |  |

| Budget for "Explorations"   | Cash<br>Expenses                               | In-kind<br>Contributions |
|---|--|--------------------------|
| Personnel<br>Outside Professional Services<br>Travel<br>Promotion & Adv.<br>Space Rental                                    | 5, 000. 00<br>1, 320. 00<br>300. 00<br>200. 00 | 1,000.00                 |
| Supplies and materials<br>Equipment Rental  | 500.00   | 3,000.00                 |
| Total   | 7, 300. 00                                     | 4, 800.00                |
| Personnel:  |  |                          |
|   |  |                          |
| Steina (Concept-execution-<br>editing)<br>Technical/Production  | 3,000.00<br>2,003.00                           |                          |
| Subtotal  | 5,000.00                                       |                          |
| Outside Professional Services   |  |                          |
| Post-mixing/Editing<br>Titling<br>Soundmix  | 908.00<br>100.00<br>302.00                     |                          |
| Subtotal  | 1, 300. 00                                     |                          |
| Travel budget:  |  |                          |
| Food (2 people/6 days)<br>Motel (2 people/6 days)   | 12 <b>0.00</b><br>182.00                       |                          |
| Subtotal  | 300.00   |                          |
| Promotion & Advertizing:  |  |                          |
| Printing and mailing of a distribution announcement   | 200.00   |                          |
|   | 200.00   |                          |
| Space Rental  |  | 1,000.00                 |
| Remaining operating expenses:   |  |                          |
| Supplies  |  |                          |
| 28 Tapes (Production)         0 15.50           1 Tape (Editing)         0 16.50           3 Tapes (Copies)         0 16.50 | = 343.00<br>= 16.50<br>= 49.50                 |                          |
| Subtotal  | 500.00   |                          |
| Equipment Rental:   |  |                          |
| Camera/Tape recorder<br>Special lenses  |  | 1,600.00<br>250.00       |
| Motorized mirrors/turntables<br>Microphone (Cardioid & Paraboli   | c) 80.00                                       | 300.00                   |
| Preamp/mixer  |  | 30.00<br>650.00          |
| Van rental + gas<br>Batteries/accessories   |  | 40.00                    |
| Cables/Misc.<br>Subtotal  |  | 50.00<br><b>3.000.00</b> |
|   |  |                          |

and the second

| 28 Tapes (Production)<br>1 Tape (Editing)<br>3 Tapes (Copies) | ē | 16.50 | = | 343.00<br>16.50<br>49.50 |
|---|---|-------|---|--------------------------|
|   |   |       |   |                          |
|   |   |       |   |                          |

| Camera/Tape recorder<br>Special lenses<br>Motorized mirrors/turntables<br>Microphone (Cardioid & Parabolic) | 80.00 | 1,600.00<br>250.00<br>300.00      |
|---|-------|-----------------------------------|
| Preamp/mixer<br>Van rental + gas<br>Batteries/accessories<br>Cables/Misc.                                   | 00.00 | 30.00<br>650.00<br>40.00<br>50.00 |
| Subtotal  |       | 3,000.00                          |

# BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE GUIDELINES

| r<br>( | This includes the application fo<br>naterial. The original copy mu-<br>General Operating Grant Appli<br>nust accompany your applicat               | st have original signatur<br>cants: See the Guidelin<br>ion.   | res.<br>es regardin   | g a letter of jus   |   |  |
|--------|--|--|---|---|---|--|
|        |  | OF THE TAX LETTER  |   |   |   |  |
| -      |  | Applicatio   | on and  | d Instru  | ictions   |  |
|        | NEW MEXICO AF  | RTS DIVISION   |   |   |   |  |
| 1.     | Name of Applicant (or Spons  | or):<br>KAS, INC   |   | 2. Name of F  | Project Organiza  | ation (if sponsored):  |
|        | Telephone: 505 47  | State: $\underline{NM}$ Zip: $\underline{E}$<br>3 - 06/4<br>$\overline{SANTA}$ FE<br>nt:<br>Senate $\underline{47}$<br>licant: $\underline{3}$   | 5 -03   | City: <u>54</u><br>City: <u>54</u><br>Telephone<br>County of<br>Legislative<br>House  |   | N_RD.<br>  |
|        | Please enter one code which<br>Sponsoring Organization's<br>arts: <u>09</u>  | CODES<br>01 Dance<br>02 Music<br>03 Opera/Music Theatre<br>04 Theatre<br>05 Visual Arts<br>07 Crafts<br>09 Media Arts<br>Please enter one code<br>project activities are invo<br>tance or service nature, n<br>project:O | in the<br>which best d<br>lived. If project<br>use the arts d | which bes<br>of work in<br>10 Literature<br>11 Interdisciplin<br>14 Multidisciplin<br>16 Major Organ<br>17 Expansion A<br>18 Community /<br>escribes the dis<br>t activities are o<br>iscipline which w | t describes the f<br>the arts: <u>99</u><br>ary<br>ary<br>ization<br>rts<br>Arts Challenge<br>cipline with which<br>i a technical assis<br>ill benefit from the | -<br>8<br>1  |
| 3.     | Project Title  | SYMBOLL HY   | STORY   | THROUGI   | H SIGHT   | 4 SOUND  |
| 5.     | Type of Support Requested ( Project Grant Grant Amount Requested fin Name of Authorizing Official)   | General Operators NMAD: \$   |   | Proje<br>Start<br>∠A  |   | Project<br>Project<br>End Date: 9/3/88<br>MAD funding year: 9/1/8748/31/88)<br>Telephone: 473-06/4 |
| U.     | Name of Authorizing Official:<br>Address of Authorizing Official<br>Name of Project Director:<br>Address of Project Director:<br>Contact Person(s) | (A Board Member  | BELL<br>RD.   | Telepho<br>Telepho<br>SANTA F   | ne: (H) <u>983</u><br>S, NM   |  |

(If different from Project Director)

.,

Please submit 10 complete copies

# **NEW MEXICO ARTS DIVISION**

ç.

| 1. Name of Applicant Organization or Sponsor:  | 2. Name of Actual Project Organization (if sponsored):  |
|--|---|
| MEVASULKAS, INC  | SAME  |
| Permanent Mailing Address:   | Permanent Mailing Address:  |
| 1600 OLD PECOS TRAIL   |   |
| Phone: 505-983.8128  | Phone:  |
|  | County:   |
| Legislative District:  | Legislative District:   |
| House25Senate47  | HouseSenate   |
| is Tax Determination , etter Included? YE.S  |   |
| Internal Revenue Service Employer Identification Number  | -1086752  |
| 3. PROJECT TITLE THE COMMISSION  |   |
| 4. Amount Requested from NMAD: \$ 12,000 Star  | Date: 9-1-82 End Date: 8-3/-83  |
| 5. PROJECT DESCRIPTION (Complete in space provided. Do NOT complete in space provided. Do NOT complete in space provided. Do NOT complete in space provided.   |   |
| a. PROJECT OBJECTIVES (State simply what you wish to accom   | plish with this project)  |
|  |   |
| AUDIO AND VIDEO POST-PRODUCTION<br>On to a one inch broadcast mast   | OF "THE COMMISSION"<br>ER TAPE.   |
| b. PROJECT ACTIVITIES (Describe how the objectives will be real  | lized)  |
| THE COMMISSION   | (STATUS REPORT):  |
| DAY PERIOD IN SANTA FE AND VIC<br>DURING THE FOLLOWING WINTER MC<br>MATERIALS WERE PRODUCED FROM T<br>THE "IMAGE ARTICULATOR" AND A<br>THE AUDIO WAS PROCESSED AND TO<br>MATERIALS COMPILED INTO 5 PREL<br>SUPPORTING VIDEO TAPE MATERIAL<br>OVERALL NARRATIVE FRAME IS IN | ONTHS VARIOUS STAGES OF INTER-<br>THE ORIGINALS WITH THE AID OF<br>COMPUTER AT THE SAME TIME<br>OGETHER WITH THE VISUAL INTER-<br>IMINARY SEGMENTS (SEE THE<br>WITH THIS PROPOSAL) THE<br>PRODUCTION NOW<br>ROADCAST FORMAT MASTER, WILL<br>A SEEK THE ADDITIONAL FUNDS<br>THIS STEP IS OUTLINED IN THE |
| SANTA FE, NEW MEXICO, 17-APR-E   | 32  |
| WOODY  | VASULKA   |
| 6. Would you be interested in continuing this project if Partial Fundi   | ing is necessary? <u>9 E.S</u> At what funding level could the project  |
| continue without seriously lowering its quality? <b>8,0000</b> (<br>APPLICABLE FOR MINI-GRANT APPLICATION OR APPLICATION   | If desired, further explanation may be supplied on separate sheet.) NOT<br>NS FOR GENERAL OPERATING SUPPORT.  |

7. If partial funding is necessary, indicate what changes will have to be made in the project activities and in the project budget.

ONLY THE VIDEO PORTION AND NOT ANDIO COULD BE POST- DRODUCED. FUNDS FOR THE AUDIO WOULD HAVE TO BE FOUND ELSEWHERE.

### 8. PROJECT DESIGN

. . Please describe the components or activities which will occur in the project and their relationship to each other. Please state: (1) exactly what the project consists of; (2) by whom, for whom and how it will be carried out; (3) where and when it will take place; (4) specific communities to be served; and (5) who the principal artists for the project are. Commitments from all project personnel must be obtained and project dates should be set prior to submission of an application and must be verifiable. Your applications will be judged by the Criteria on page \*\* of the NMAD Grants Guidelines.

Video translation of C.C.Bell's Symbolic Nistory:

The thirty-eight slide-tape presentations of Charles C. Bell's <u>SYMBOLIC WISTORY -- Through Sight and Sound</u> have been acclaimed as a breakthrough in cultural studies -- a new form of synthesizing drama, and a mine of multimedia documentation, which anyone exploring the development of ideas, music, literature and the arts should have access to.

Over the last years, with help from the Skaggs Foundation, the sound-track of these shows has been recorded on high-quality open-reel master tapes, available for making film or video.

Now Woody and Steina Vasulka, video artists known and esteemed, recognising the value of the shows for learning and entertainment, have volunteered to recreate the slide-tape sequence in broadcastquality video, working with the author on a cost-sharing basis.

Bell meanwhile has been pushing ahead with the photographing of new images and details, more or less doubling the 80 to 140-slide carousels of the former shows -- as the faster moving medium of video requires.

So far, two \$5,000 grants from the Skaggs Foundation have financed the videoing of ten <u>Symbolic History</u> units on 3/4" video masters. Professionals who have seen them (Jack Good, Eva Soltes, etc) are delighted with the quality of picture and sound, as with the fidelity to the originals.

We have demonstrated that in two twelve-hour days the three of us can make a creative adaptation of a single 60 to 90 minute show, in itself a distributable item of humanistic scholarship and art, as well as a prototype for later generations of film or video. Since the Vasulkas are donating half their time and Bell all of his, this essential work can be completed for the modest cost of \$1,000 per show.

The aim is to proceed as rapidly as financing allows with this transfer to an electronic medium apt for storage, broadcast and VMS distribution. Since <u>Symbolic Wistory</u> is not primarily for pastime one-shot viewing (though challenging that way), when the shows are available on video cassettes which can be owned and often played, the general understanding and enjoyment of the arts should be raised.

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్రాయాలో ఉంది. సంగ్రామి సంగార్థి సంగార్థి సంగార్థు ఉన్న సంగార్థు ఉన్న సంగార్థు సంగార్థు సంగార్థు సంగార్థు సంగార సినిమా సౌకర్యంలో సంగార్థు సంగార్థు సంగార్థు సంగార్థు సౌకర్యంలో సాధాని సంగార్థు సాధాని సంగార్థు సంగార్థు సంగార్థ సాధానికి స్పట్టింగు సాధానికి సంగార్థు సౌకర్యంలో స్పట్టింగు సౌకర్యంలో సౌకర్యంలో సాధాని సంగార్థు సౌకర్యంలో సంగార్ స్పట్టింగు సాధానికి సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో స్పట్టింగు సౌకర్యంలో సౌకర్యంలో సాధానికి సాధానికి సౌకర్యంలో సం సాధానికి సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో స్పట్టింగు సౌకర్యంలో సాధానికి సౌకర్యంలో స్ సౌకర్యంలో సౌకర్యం సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో సౌకర్యంత్ సౌకర్యంలో సౌకర్యంలో సౌకర్యంలో స page 2 Vo**cal Windows** Budget Breakout

CASH

IN-KIND

| ROE: Equipment Rental  |       | 2,040 |
|--|-------|-------|
| <ol> <li>Video Camera with 3/4" tape deck and accessories</li> <li>6 days x \$200/day</li> </ol> |       | 1,200 |
| 2. Video Monitors - 23"<br>2 x 6 days x \$30/day   |       | 360   |
| 3. Slide Projectors (2) with dissolve unit<br>6 days x \$30/day                                  |       | 180   |
| <ol> <li>Stereo Audio Cassette Tape deck</li> <li>6 days x \$20/day</li> </ol>                   |       | 120   |
| 5. Reel to Reel Audio Tape Deck<br>6 days × \$30/day   |       | 180   |
| ROE: Other   | 150   | 488   |
| 1. Shipping for parts of stage set<br>Los Angeles to Santa Fe                                    | 150   |       |
| 2. Administrative Fee @ 5%   |       | 488   |
| TOTAL EXPENSES   | 9,775 | 7,796 |
| REVENUES   |       |       |
| Admissions: 500 x \$5 (avg.)   | 2,500 |       |
| Contracted Services Revenue: 2 locations x \$500 each  | 1,000 |       |
| Other Private Support: Contributions to project  | 1,275 |       |
| Total Applicant Cash   | 4,775 |       |
| Grant Amount Requested:  | 5,000 |       |
| TOTAL REVENUES   | 9,775 |       |

11. OUTLINE OF PROJECT SCHEDULE (Actual start and end dates plus any other date that marks a significant step in the project)

THE SLIDE ENRICHING AND FORMATTING, AND COMLETITION OF ALL SOUNDTRACKS FOR ALL 10 PROGRAMS WILL BE READY BY SEPTEMBER FIRST. EACH PROGRAM REALIZATION WITH OPENING AND CLOSING TITLES TAKES ONE WEEK. WITH 10 SHOWS IN 10 WEEKS THE PROJECT WILL BE COMPLETED BY MID NOVEMBER. 12. How will you evaluate this project? Who will do the evaluation and what criteria will you use in the evaluation?

# OUTSTANDING

| 13 | . How many artists will participate in the project?  | 3                                   |                     |   | ·····                                 |
|----|--|-------------------------------------|---------------------|---|---------------------------------------|
| 14 | . In which counties will this project take place?  | SANTA                               | FE                  | ······································  |                                       |
| 15 | . Give the total number of people in the general pub<br>who will benefit directly from the project and bre | lic (audience, p<br>ak out the tota | articipants, studer | nts) excluding employee<br>BELL SHOWS H | es and/or paid performers<br>AVE BEEN |
|    | WITNESSED WEEKLY BY A  |                                     |                     |   |                                       |
|    | WHEN AVAILABLE ON .  | TADE T                              | HAT AND             | IENVE WILL                              | MULTIPIN                              |

16. APPLICANT INFORMATION-In the case of sponsorship, information should apply ONLY to the project organization. If information is not available, please so indicate and leave this area blank.

a) When was your organization founded? \_\_\_\_\_

EXPONENTIALLY.

b) What are the principal activities and functions of your organization?

FUNDRAISING FOR INDIVIDUAL ARTISTS WITH EMPHABIS ON TECHNOLOGICAL ARTS

1976

c) What is the geographic area served by your organization?

USA / EUROPE

d) How many artists participated in your organization's activities during the previous year? \_\_\_\_\_\_20

e) How many individuals benefitted (audience, students, etc.) from your activities during the previous year? \_\_\_\_\_A

f) How many volunteers assisted your organization during the previous year? \_

# Vocal Windows Sponsored by Vasulkas, Inc.

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## PROJECT BUDGET BREAKOUT

| EXP | ENSES  | CASH  | <u>IN-KIND</u> |
|-----|--|-------|----------------|
| Per | sonnel: Artistic   | 6,000 | 2,000          |
| 1.  | Four collaborators - Albuquerque, Karp, La Barbara<br>and Steina             |       |                |
|     | 4 artists x 4 weeks x \$500/wk   | 6,000 | 2,000          |
| OFS | : Artistic   | 400   | 700            |
| 1.  | Lighting Designer, flat fee  | 400   | 200            |
| 2.  | One actor, flat fee  |       | 500            |
| OFS | : Other  | 800   | 500            |
| 1.  | Technical Assistants<br>3 x \$300 each flat fee                              | 600   | 300            |
| 2.  | Administrative Co-ordinator, flat fee  | 200   | 200            |
| Spa | ce Rent:   | 300   | 400            |
| 1.  | Rehearsal Studios, Agua Fria and Pecos<br>2 wks x \$150/wk                   |       | 300            |
| 2.  | Performance Space (Santa Fe)<br>4 days x \$100/day                           | 300   | 100            |
| Tra | vel  | 1,620 | 1,668          |
| 1.  | 6 RT Los Angeles to Albuquerque x \$120 each                                 | 720   |                |
| 2.  | Ground Transportation<br>6 RT Albq. to Santa Fe x \$30 each                  | 180   |                |
|     | 6 RT local Los Angeles to airport x \$20 each                                | 120   |                |
| З.  | Perdiem - 2 Collaborators and 1 Tech. Asst.<br>3 people x 21 days x \$36/day | 600   | 1,668          |
| ROE | : Production Supplies and Materials  | 505   |                |
| 1.  | Powdered Pigments<br>30 pounds x \$3.50/pound                                | 105   |                |
| 2.  | Videotape Cassettes, 20 min.<br>10 x \$15                                    | 150   |                |
| з.  | Ground Cloth to cover stage area<br>cut, assembled and stitched canvas       | 200   |                |
| 4.  | Fine grade sand, $lac{1}{2}$ load delivered                                 | 50    |                |

19. PROPOSED PROJECT BUDGET—Expenses and income for the project. If you are in doubt about where to list these, please see "Budget Definitions" attached to this application.

ROUND FIGURES TO THE NEAREST DOLLAR

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| EXPENSES  | CASH EXPENSES  | IN-KIND CONTRIBUTIONS                    |
|---|--|--|
| Personnel:  | 4,500  | 5,500                                    |
| Arustic<br>Technical/Production   |  | 2,500                                    |
| Administrative  |  | 200                                      |
| Outside Fees and Services:  |  |  |
| Artistic  |  |  |
| Other   |  | 500                                      |
| Space Rental:   |  | 200                                      |
| Travel:   |  |  |
| Marketing:  |  | 500                                      |
| Remaining Operating Expenses:<br>Production Supplies & Materials  | 500  | 500                                      |
| Equipment Rental  | 5,500  |  |
| Other   | ····   | 100                                      |
| TOTAL CASH EXPENSES   | 10,000   |  |
| TOTAL IN-KIND CONTRIBUTIONS   |  | 10,000                                   |
| INCOME  | CASH INCOME  |  |
| REVENUE   |  |  |
| Admissions:   | · · · · · · · · · · · · · · · · · · ·  |  |
| Contracted Services Revenue:<br>(Income from fees earned through<br>sales of services)  |  |  |
| Other Revenue:  |  |  |
| SUPPORT   |  |  |
| Corporate Support:  |  |  |
| Foundation Support:   | 10,000   |  |
| Other Private Support:  |  |  |
| Government Support:   |  |  |
| Federal   |  |  |
| State/Regional<br>(do not include this grant request)   |  | an a |
| Local   | ne a construir a state de la construir de la co<br>La construir de la construir de | n - Na shirth a tha                      |
| Applicant Cash:<br>(Funds from present and/or anticipated resources the<br>applicant plans to provide to this proposed project)<br>TOTAL APPLICANT CASH |  |  |
| (Revenue + Support)   |  | NOTE: Total Cash Income<br>MUST EQUAL    |
| GRANT AMOUNT REQUESTED  | 10.000   | the \$ amount of                         |
| TOTAL CASH INCOME<br>A SEPARATE BUDGET BREAKOUT MUST BE ATT   |  |  |

- 20. FUNDING RECORD WITH NMAD-In the case of sponsorship, information should apply ONLY to the project organization. If information is not available, please so indicate and leave this area blank.
  - no

a. Do you have any other applications in this category currently on file with NMAD? \_\_\_\_\_

b. If you have more than one application submitted in this category, list your order of funding priority for the applications. (If a priority is not listed, it will be assumed no priority exists.)

NA for Project Organization

c. Has your organization applied in previous years to the New Mexico Arts Division for funding? If yes, please list project titles, years applied and grant award (if any) for each year of the past three years.

YEARS

PROJECT TITLE

\$ GRANT AWARD

## 21. ASSURANCES

If grant is awarded, applicant must give assurance to the NMAD that (1) Project covered by the application will be administered by and under supervision of the Applicant; (2) funds received will be used solely for the described project; (3) Applicant has read and will conform to the NMAD's general guidelines, application instructions and information, and (4) that filing of this application has been authorized by the governing body of the applicant organization. It is mutually agreed that all parties shall comply with Title VI of the Civil Rights Act of 1964; Fair Labor Standards under Section (i) and (j) of the National Foundation on the Arts and Humanities of 1965; Section-504 of the Repabilitation Act of 1973; and Title IX, where applicable *j* 

Signature of Project Director Signature of Authorizing Official (Board Member) Joan La Barbara Steina Vasulka Typed Name of Project Director Typed Name of Authorizing Official PAGE 9

| 21. Has your organization applied in previous years to the New Mexico Arts Division for funding?              | - D 1 |
|---|-------|
| If yes, please list project titles, years applied and grant awards (if any) for each of the past three years. |       |

| YEARS | PROJECT TITLE                  | \$ GRANT AWARD |
|-------|--------------------------------|----------------|
| 1981  | "SOUTHWESTERN LANDSCAPES"      | 2,000.         |
| 1982  | "THE COMMISSION"               | 8,800.         |
| 1983  | "Sculptor-Sculptor"            | 2,800.         |
| 1983  | "PERSPECTIVES / RETROSPETIVES" | 4,802.         |
| 1986  | "TIERRA MIA"                   | 6,000.         |
| 1986  | "VOLAL WINDOWS"                | 3,500.         |
| 1986  | "THREE SONGS"                  | 3,000.         |

#### 22. ASSURANCES

If grant is awarded, applicant must give assurance to the NMAD that (1) Project covered by the application will be administered by and under supervision of the Applicant; (2) funds received will be used solely for the described project; (3) Applicant has read and will conform to the NMAD's general guidelines, application instructions and information, and (4) that filing of this application has been authorized by the governing body of the applicant organization. It is mutually agreed that all parties shall comply with Title VI of the Civil Rights Act of 1964; Fair Labor Standards under Section (i) and (j) of the National Foundation on the Arts and Humanities of 1965; Section 504 of the Rehabilitation Act of 1973; and Title IX, where applicable.

Signature of Authorizing Official (Board Member)

STEINA VASULKA Typed or Printed Name of Authorizing Official

CHARLES G. BELL Typed or Printed Name of Project Director

PAGE 9

no

18. PROPOSED PROJECT BUDGET—Expenses and income for the project. If you are in doubt about where to list these, please see "Budget Definitions" attached to this application.

# ROUND FIGURES TO THE NEAREST DOLLAR

| EXPENSES  | CASH EXPENSES    | IN-KIND CONTRIBUTIONS                 |
|---|------------------|---------------------------------------|
| Personnel:<br>Artistic —  | 6,000            | 2,000                                 |
| Technical/Production  |                  |                                       |
| Administrative  |                  |                                       |
| Outside Fees and Services:<br>Artistic —  | 400              | 700                                   |
| Other —   | 800              | 500                                   |
| Space Rental:   | 300              | 400                                   |
| Travel: —   | <del>1,620</del> | <del></del>                           |
| Marketing: —  |                  |                                       |
| Remaining Operating Expenses:<br>Production Supplies & Materials — —  | 505              |                                       |
| Equipment Rental  |                  | 2,040                                 |
| Other —   | 150              | 488                                   |
| TOTAL CASH EXPENSES   | 9,775            |                                       |
| TOTAL IN-KIND CONTRIBUTIONS   |                  | 7,796                                 |
| INCOME  | CASH INCOME      |                                       |
| REVENUE<br>Admissions: -  | 2,500            | -                                     |
| Contracted Services Revenue:<br>(Income from fees earned through<br>sales of services)  | 1,000            | -                                     |
| Other Revenue:  |                  | _                                     |
| SUPPORT<br>Corporate Support:   |                  | _                                     |
| Foundation Support:   |                  | _                                     |
| Other Private Support:  | 1,275            | _                                     |
| Government Support:   |                  |                                       |
| Federal -   |                  | -                                     |
| State/Regional<br>(do not include this grant request)   |                  | _                                     |
| Local   | ,,,,             | _                                     |
| Applicant Cash:<br>(Funds from present and/or anticipated resources the<br>applicant plans to provide to this proposed project) |                  | _                                     |
| TOTAL APPLICANT CASH<br>(Revenue + Support)   | 4,775            | NOTE: Total Cash Income<br>MUST EQUAL |
| GRANT AMOUNT REQUESTED  | 5,000            | - the \$ amount of                    |
| •<br>TOTAL CASH INCOME  | 9,775            | Total Cash Expense                    |

PAGE 7

13. In the space below please describe in 2 or 3 sentences the experience and qualifications of each of the key personnel in the project. Give name, role in project and background. Include artistic, technical and administrative personnel. ("See Attached Resume" IS NOT ACCEPTABLE.)

LITA ALBUQUERQUE, Visual Artist: Albuquerque is best known for her large outdoor installations, including the Washington Monument Project (1980) for the International Sculpture Conference held in Washington, DC. Her work is exhibited extensively in museums and galleries across the country. Currently Albuquerque is Professor of Art at Otis/Parsons School of Design and is working on major sculptural commissions.

BARBARA KARP, Theatre Director: Karp has directed productions in the leading opera houses internationally, including Covent Garden, Vienna Volksoper, New York City, Seattle, Berlin and San Francisco. She produced and directed her first film in 1979, "La Voix Humaine", which was funded by the American Film Institute and the National Endowment for the Arts, was telecast on PBS, received the international CINE Golden Eagle award and the Special Merit Award of the Edinburgh Festival. In addition to subsequent film and television productions, she has directed many off-Broadway and regional theatre companies' productions. Also, she has performed as an actress, dancer and concert pianist.

JOAN LA BARBARA, Composer and Performer: La Barbara is a composer, experimental vocalist, writer and performer whose work has expanded the sound spectrum of the vocal instrument, exploring its vast possibilities in performance, multi-media works and with electronics. Her compositions are widely performed. She has participated in international festivals since 1977 and has frequently collaborated with other artists in creating staged works for a variety of settings. In 1980 she received an NEA award in Music Composition. In 1979 she was composer in residence in West Berlin on a grant from the Deutsche Akademischer Austauschdienst Künstler program. Five albums of her compositions have been produced in the past few years.

STEINA, Video Artist: Steina was born in Iceland, attended the Music Conservatory in Prague from 1959 to 1963 and joined the Icelandic Symphony Orchestra in 1964. The following year she moved to the U.S. and has since been a seminal force in the development of the electronic arts. She co-founded The Kitchen, a major exhibition center in New York City. She is a continuing explorer of possibilities for generation and manipulation of the electronic image through a broad range of technological tools and aesthetic concerns. Her videotapes are exhibited and broadcast widely in the U.S. and Europe. She was named a Guggenheim Fellow in 1976 and has received numerous other awards and grants. Since moving to Santa Fe in 1980, she has produced a series of videotapes relating to the land and an installation entitled "The West".

14. How will you evaluate this project? Who will do the evaluation and what criteria will you use in the evaluation?

successful completion of the several stages of collaboration; integration of the art forms into a cohesive whole; public and critical response to the premiere and subsequent performances; self-evaluation of the process by the participants; the acceptance for broadcast of the videotape; audience attendance at the performances; responses and evaluations from the presenting organizations ONLY COMMUNITY CHALLENGE, GENERAL SUPPORT AND MAJOR ORGANIZATION APPLICANTS FILL IN THIS FORM. Include proposed project figures from previous page in next year's expenses and revenue.

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# 20. TOTAL ORGANIZATION FISCAL ACTIVITY

| EXPENSES   | Last Year<br>Operating Expenses<br>Yr. ending | Present Year<br>Operating Expenses<br>Yr. ending | Next Year<br>Operating Expenses<br>Yr. ending |
|--|---|--|---|
| Personnel:<br>Artistic   | \$  | \$   | _ \$  |
| Technical/Production   |   | <u> </u>   |   |
| Administrative   |   | <u> </u>   |   |
| Outside Fees and Services:<br>Artistic                           |   |  |   |
| Other  |   |  |   |
| Space Rental:  |   |  | <u> </u>                                      |
| Travel:  |   | <u> </u>   | <u> </u>                                      |
| Marketing:   |   |  |   |
| Remaining Operating Expenses:<br>Production Supplies & Materials |   |  |   |
| Equipment Rental   | ••••••••••••••••••••••••••••••••••••••        |  |   |
| Other  |   |  |   |
| Capital Expenditures:<br>Acquisitions                            | ·   |  | <u> </u>                                      |
| Other  | <u></u>                                       |  |   |
| TOTAL CASH EXPENSES  |   |  |   |

| INCOME                                   | Last Year<br>Operating Income | Present Year<br>Operating Income | Next Year<br>Operating Income |
|--|-------------------------------|----------------------------------|-------------------------------|
| REVENUE<br>Admissions:                   | \$                            | \$                               | \$                            |
| <b>Contracted Services Revenue:</b>      |                               |                                  |                               |
| Other Revenue:                           |                               |                                  |                               |
| SUPPORT<br>Corporate Support:            |                               |                                  |                               |
| Foundation Support:                      |                               |                                  |                               |
| Other Private Support:                   |                               |                                  |                               |
| Government Support:<br>Federal           |                               |                                  |                               |
| State/Regional<br>(include this request) |                               |                                  |                               |
| Local                                    |                               |                                  |                               |
| Applicant Cash:<br>TOTAL CASH INCOME     | \$                            | \$                               | \$                            |

# 7. PROJECT DESCRIPTION

Brief background information is necessary to understand the proposed project. Please state: (1) exactly what the project consists of; (2) by whom, for whom and how it will be carried out; (3) where and when it will take place; (4) specific communities to be served; and (5) who the principal artists for the project are. Commitments from all project personnel must be obtained and project dates should be set prior to submission of an application and must be verifiable. Complete in this space DO NOT continue on a separate sheet.

NMAD support will help with artistic fees for the collaboration of visual artist Lita Albuquerque, composer/performer Joan La Barbara, theatre director Barbara Karp and video artist Steina on VOCAL WINDOWS, an evening of performance work to be premiered in New Mexico in May 1987. VOCAL WINDOWS was first presented as a staged work-inprogress in March 1986 at the Los Angeles Theatre Center. Accompanying slides and reviews are from that performance. The New Mexico premiere will be staged for an open gallery or courtyard space, with performances scheduled in Santa Fe (3), Albuquerque (1) and Taos (1). The budget for this application reflects expenses for staging the premiere and two subsequent performances in Santa Fe. (Marketing, publicity and touring expenses will be handled by the producing organizations in their respective communities.)

DESCRIPTION OF THE SEGMENTS: VOCAL WINDOWS has five segments, each involving Albuquerque, La Barbara and Steina in various combinations, with Karp responsible for integrating and staging the entire production.

1. "as lightning comes, in flashes" - The music was composed by La Barbara in 1981. For this production, she performs wearing a large costume designed by Albuquerque that unfolds as the piece progresses and which, at the end, is left behind on the stage as a soft sculpture.

2. "Voice Windows" - Steina and La Barbara began this collaboration in early 1986 when Woody Vasulka developed an interactive videotape system. Images from a primary video tape are displayed on a monitor while La Barbara's voice in live performance activates the intercutting of images from a secondary tape onto the primary one. Her specific vocal sounds determine the shapes and patterns of the intercuts.

3. "Performance Piece" - Albuquerque creates the visual setting through which La Barbara moves and performs. The resultant work is a study of left brain/right brain theory as it explores the artistic process in action.

4. "Berliner Träume" - La Barbara was commissioned to compose the music for the Airworks radio series in 1983. It is a reflection of her memories and experiences in Berlin over a ten year period. Albuquerque and Steina create large slide and video projections of historical and contemporary images of Berlin as the stage setting for La Barbara's performance.

5. "Winds of the Canyon" - Composed by La Barbara in 1982 and revised for this collaboration; this presentation involves a personal ritual developed by the four collaborators and inspired by (but <u>not</u> imitative of) Native American ceremonies.

PROJECT DEVELOPMENT: The collaborators will meet in Santa Fe for one week in Fall/ Winter 1986-87 to visit sites and select spaces for the production, design the production for the selected spaces, meet with producing organizations and rehearse in the Agua Fria and Pecos studios. One week prior to performance, the collaborators meet in Santa Fe for the final rehearsal period. In the interim, they will correspond and meet as travel schedules permit. Albuquerque and Karp live in California; La Barbara and Steina in New Mexico. Albuquerque works with a young artist assistant, who also performs in one of the segments, and two other young artists will be employed as technical assistants for the final rehearsal and productions. The collaborators will be utilizing spaces that can accommodate 150 to 300 people and provide for flexibility in staging, projection of large images and performance so that the nature of the space is integrated into the production design. An extension of VOCAL WINDOWS is a video work with much of the taping to be done during rehearsal and performance in Santa Fe and Pecos. Funding from other sources is being sought for the taping and post-production.

# 17. TOTAL ORGANIZATIONAL FISCAL SUMMARY

for Project Organization \_\_\_\_\_ for Sponsor \_\_\_\_\_ (check one)

All applicants must fill in the following information. If unavailable for the project organization, the sponsoring organization should complete this.

| EXPENSE TOTALS: |                     | Last Year<br>Operating Expenses | Present Year<br>Operating Expenses                | Next Year<br>Operating Expenses |
|-----------------|---------------------|---------------------------------|---|---------------------------------|
|                 | Year:<br>\$ Amount: | 32,647                          | 42,200  | 35,000                          |
| INCOME TOTALS:  |                     | Last Year<br>Operating income   | (preliminary)<br>Present Year<br>Operating Income | Next Year<br>Operating Income   |
|                 | Year:<br>\$ Amount: | 39,297                          | 45,242.76   | 35,000                          |
|                 |                     |                                 |   |                                 |

18. IF THIS PROJECT IS SPONSORED, what is the sponsor's role in the proposed project? (e.g., fiscal agent) If the project is not sponsored, leave this section blank. NMAD recommends a written agreement between the sponsor and the project organization stating mutual obligations to this project.

ESSENTIAL

# BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE GUIDELINES

Please submit the original and 3 copies of the cover letter (if applicable), the completed application form and the budget breakout. In addition, please submit 14 copies of all resumes, promotional sheets, reviews and other supporting material to the NMAD office.

General Operating Grant Applicants: See the Guidelines regarding a letter of justification which must accompany an application for a General Operating Grant.

# **Application and Instructions**

# NEW MEXICO ARTS DIVISION

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1.

Discipline: NMAD #

Stino

| Name of Applicant (or Sponsor):<br>The Vasulkas, Inc.                           | 2. Name of Project Organization (if sponsored):<br>VOCAL WINDOWS                    |  |  |
|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--|--|
| Permanent Mailing Address:<br>Rt. 6, Box 100                                    | Permanent Mailing Address:<br>Box 1004                                              |  |  |
| City: Santa Fe State: <u>NM</u> Zip: <u>87501</u><br>Telephone: <u>473-0614</u> | City: <u>Pecos</u> State: <u>NM</u> Zip: <u>87522</u><br>Telephone: <u>757-6742</u> |  |  |
| County of Applicant:Santa_Fe                                                    | County of Project Organization:San Miguel                                           |  |  |
| Legislative District of Applicant:                                              | Legislative District of Project Organization:                                       |  |  |
| House 24 Senate 24                                                              | House8                                                                              |  |  |
| Congressional District of Applicant:                                            | Congressional District of Project Org.: 3rd                                         |  |  |
| Federal Employer Identification Number:16-1086752                               |                                                                                     |  |  |

## ONE COPY OF THE TAX LETTER MUST BE INCLUDED WITH THE ORIGINAL COPY OF THE PROPOSAL

| 3.                                                     | Project Title   | VOCAL WINDO        | JWS             |             |         |                        | ······              |                                         |                                       |
|--------------------------------------------------------|-----------------|--------------------|-----------------|-------------|---------|------------------------|---------------------|-----------------------------------------|---------------------------------------|
|                                                        |                 | Requested from     |                 | 5,000       |         | Project<br>Start Date: | 9/1/86<br>ceed NMAC | Project<br>— End Date:<br>funding year: | <u>8/31/87</u><br>9/1/86-8/31/87)     |
| Steina Steina                                          |                 | Steina Va          | sulka           |             |         |                        | Telephone:          | 473-0614                                |                                       |
| 5. Name of Authorizing Official: Telephone: Telephone: |                 |                    |                 |             |         |                        |                     |                                         |                                       |
|                                                        | Address of Aut  | norizing Official: | Rt. 6, 1        | 3ox 100, Sa | inta Fé | , NM 875               | 01                  |                                         |                                       |
|                                                        | Address of Aut  | t Director:        | an La Barbi     | ara         |         |                        | 757-67              | 42 (0)                                  | 757-6742                              |
|                                                        | Name of Project | t Director:        |                 |             |         | Telephone: (H)         |                     | ······································  |                                       |
|                                                        | Address of Pro  | ject Director:     | PO Box 10       | 04, Pecos,  | NM 87   | 7522                   |                     |                                         | · · · · · · · · · · · · · · · · · · · |
| Contact Person(s)                                      |                 | (a) Steina         | Vasulka         |             |         | Telephone: (H)         | 473-06              | 14 (O)                                  | 473-0614                              |
|                                                        | Contact Person  | (If di             | ferent than Pro |             |         |                        |                     | (0) _                                   | <u></u>                               |

#### 9. PARTIAL FUNDING

- a) Would you be interested in doing this project at a lower grant amount? 😡 yes
- b) At what dollar grant amount could the project continue without seriously lowering its quality? \$ /,000 (Where applicable, more than one level of partial funding may be indicated. Projects will not be funded below the partial funding amount(s) set by you and those amounts cannot be changed once the application has been sent to the panel.)

По

Partial funding does not apply to General Operating Grants and Minigrants. Community Arts Challenge applicants should read the Guidelines regarding partial funding. Multidisciplinary applications must give a separate partial funding amount for each discipline.

c) In the case of partial funding, describe in the space below exactly what project changes would occur in activities and in the budget. If activities are reduced in scope, please describe how and say where in the budget costs would be reduced and by how much. If activities will not change because you plan to raise additional income, please indicate this.

| 10 | SHOWS | FOR        | 10,000 |
|----|-------|------------|--------|
| 9  | И     | ()         | 9:000  |
| 8  | 1,    | 11         | 8,000  |
| 7  | 11    | 17         | 7,000  |
| 6  | 61    | 11         | 6,000  |
| 5  | L     | <i>i</i> i | 5,000  |
| Ч  | 12    | 11         | 4,000  |
| 3  | h     | 41         | 3,000  |
| 2  | ()    | n          | 2,000  |
| 1  | 61    | 11         | 1,000  |

10. In the space below please describe in 2 or 3 sentences the experience and qualifications of each of the key personnel in the project. Give name, role in project and background. Include artistic, technical and administrative personnel. ("See Attached Resume" IS NOT ACCEPTABLE.)

Charles Bell, tutor at St. Johns' college, formerly a Rhodes scholar, professor at princeton and University of Chicago, a well known poet, novelist and writer on the arts science and philosophy, has created "Symbolic History through sight and sound", perhaps the most searching multi-media study of culture undertaken by a single man.

> Steina (born in Iceland, 1940) attended the Music Conservatory in Prague from 1959 to 1963, and joined the Icelandic Symphony Orchestra in 1964. Woody Vasulka was born in Brno, Czechoslovakia, and studied metal technologies and hydraulic mechanics at the School of Industrial Engineering there. He then entered the Academy of Performing Arts, Faculty of Film and Television, in Prague, where he began to direct and produce short films.

> Woody and Steina came to the United States in 1964, and lived in New York City. They have been pioneers in the development of the electronic arts since 1970, when they founded "The Kitchen," a New York City media theater and exhibition center. Steina has continued explorations in the possibilities for the generation and manipulation of the electronic image through a broad range of technological tools and aesthetic concerns. In 1978 her exhibit, "Machine Vision," was held at the Albright-Knox Art Gallery in Buffalo, New York. She was a Guggenheim Fellow in 1976.

> In 1974 Woody became a faculty member of the Center for Media Study at State University of New York, Buffalo, and began his investigations into computer controlled video, building "The Vasulka Imaging System," a personal imaging facility. He is a 1979 Guggenheim Fellow. Since their move to Santa Fe in 1980 Woody has produced two video tapes, "Artifacts" and "The Commission," an operatic work based on the legend of Paganini and Hector Berlioz. Steina has produced a series of video tapes relating to the land of the Southwest.

PAGE 4

|                                    |                    | PROJECT BL                                                | JDGET ONLY    |                                                                        |                                                                                               |
|------------------------------------|--------------------|-----------------------------------------------------------|---------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                    | REQUEST OF<br>NMAD | IN-KIND<br>MATCH                                          | CASH<br>MATCH | PROJECT<br>TOTAL                                                       | PROJECT CASH SOURCES<br>Earned Income: 4000 - 10<br>Contributions: 8000 - 10                  |
| RTISTIC EXPENSE<br>Personnel       |                    | 500<br>+000                                               | 3500<br>3000  | 4000                                                                   | Private Foundation<br>Grants*:                                                                |
| Supplies and materials             | 500                |                                                           |               | 500                                                                    | City or County                                                                                |
| Equipment Rental                   | 1500               | 1500                                                      |               | 3000                                                                   | Funds:                                                                                        |
| Equipment Purchase                 |                    | 1500                                                      |               |                                                                        | Other Federal 3500<br>Grants*:                                                                |
| Travel                             | 3.00               |                                                           |               | 300                                                                    |                                                                                               |
| DMINISTRATIVE EXPENSE<br>Personnel |                    |                                                           |               |                                                                        | NMAD: 3. 3                                                                                    |
| Promotion & Adv.                   | 200                |                                                           |               | 200                                                                    | FOR PROJECT: 6,000                                                                            |
| Printing                           |                    |                                                           |               |                                                                        | *Specify Source 7, 500                                                                        |
| Supplies                           |                    |                                                           |               |                                                                        | ]                                                                                             |
| Rental/Facilities                  | 500                | 500                                                       |               | 1000                                                                   | ]                                                                                             |
| OTHER                              |                    |                                                           | ~             |                                                                        | ]                                                                                             |
| OTAL EXPENSE                       | 3000               | 3000 -                                                    | 3000          | 9000                                                                   |                                                                                               |
|                                    | ORG                | ANIZATIONAL TO                                            | TAL FISCAL AC |                                                                        | · · · · · · · · · · · · · · · · · · ·                                                         |
| A. EXPENSES<br>Artistic Expenses   | Next Fi            | mate for<br>scal Period<br>- <u>8/</u> To: <u>3·3/·82</u> | Current F     | / <i>NARY</i><br>Fiscal Period<br><u>80</u> To: <u>3-3/-8</u> /<br>6/7 | Most Recent<br>Completed Fiscal Period<br>From: <u>4-1-79</u> To: <u>3-31-80</u><br>20,251.50 |
| Administrative Expenses            | 657                |                                                           | 64            | 7.40                                                                   | 627.24                                                                                        |
| TOTAL                              | 36,000             |                                                           | 16,92         |                                                                        | 20,878.74                                                                                     |
| B. REVENUES<br>Earned Income       | 5,00               |                                                           | 4,99          |                                                                        | 3,747                                                                                         |
| Contributions 3, auto              |                    |                                                           |               |                                                                        |                                                                                               |
| Private Foundation Grants          |                    | -                                                         |               |                                                                        |                                                                                               |
| City or County Funds               | ,0                 | 00                                                        |               |                                                                        | 10                                                                                            |
| Federal Grants                     | 45,00              | J.                                                        | /             | <u></u>                                                                | 10,000                                                                                        |
| Other N.Y. STATE<br>TOTAL          | 36.0               |                                                           | 7,00          | <u>x (1</u>                                                            | 21747 -                                                                                       |

| a)  <br> <br> <br>                                                                                                                                                                                                                                                                                                         | Does the Project Organization serve<br>If yes, please indicate who it serves a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | a special audience? yes no<br>and how:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                |                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------|
|                                                                                                                                                                                                                                                                                                                            | regarding access for the handicapped                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 🗌 yes          |                         |
| <b>C)</b>                                                                                                                                                                                                                                                                                                                  | Has the Project Director contacted N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | MAD's 504 Coordinator for Handicapped Access Information?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 🗋 yes          |                         |
|                                                                                                                                                                                                                                                                                                                            | is there ramp access for wheelchairs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 🗌 yes          |                         |
|                                                                                                                                                                                                                                                                                                                            | is there a wheelchair area for viewing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | g performers?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ☐ yes<br>∏ yes |                         |
|                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | b bars and door width to accommodate a wheelchair?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |                         |
|                                                                                                                                                                                                                                                                                                                            | Will public performances or activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 🗋 yes          | п                       |
|                                                                                                                                                                                                                                                                                                                            | Interpreters for the hearing impaired                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | aped program notes for the visually impaired?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                | Ы                       |
|                                                                                                                                                                                                                                                                                                                            | information on the location of the ne                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | arest public handicapped access bathroom?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | yes            | ō                       |
|                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plan to provide programmatic accessibility to the handicapped                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | d for this pro | <b>ject:</b> .          |
|                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |                         |
| f)                                                                                                                                                                                                                                                                                                                         | How will handicapped access to pro                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | grams be advertised?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                |                         |
| •                                                                                                                                                                                                                                                                                                                          | Ethnic Minorities<br>Disabled                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | of the following groups in your program activities:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                         |
|                                                                                                                                                                                                                                                                                                                            | Women<br>Members of Inner City, Rural an                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | d Tribal Communities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                |                         |
| ħ)                                                                                                                                                                                                                                                                                                                         | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | the combined Native American, Asian, Black and Hispanic/La                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | tino represe   | mtatic                  |
| •                                                                                                                                                                                                                                                                                                                          | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff # % Bo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | the combined Native American, Asian, Black and Hispanic/La                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                |                         |
| •                                                                                                                                                                                                                                                                                                                          | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff # % Bo<br>Are members of ethnic minority grou                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | the combined Native American, Asian, Black and Hispanic/La<br>bard # %<br>ups involved in decision-making roles in the Project Organizat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ion?           |                         |
| •                                                                                                                                                                                                                                                                                                                          | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff # % Bo<br>Are members of ethnic minority grou                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | the combined Native American, Asian, Black and Hispanic/La                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ion?           |                         |
| i)<br>Circk                                                                                                                                                                                                                                                                                                                | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff # % Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br><br>the categories below which described.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>ribe their roles:<br>ibe your organization's predominant characteristics. Use mo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ion?           | <b>yes</b>              |
| i)<br>Circk<br>need<br>SET                                                                                                                                                                                                                                                                                                 | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descrifted.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.                                                                                                                                                                                                                                                                                                                                                                | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organizat<br>ribe their roles:<br>ibe your organization's predominant characteristics. Use model<br>CANT (Sponsor)<br>Y Secondary School Student                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | tion?          | cates                   |
| i)<br>Circk<br>need<br>SET<br>G                                                                                                                                                                                                                                                                                            | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descrifted.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.<br>Note: Not to be used by individuals.)                                                                                                                                                                                                                                                                                                                       | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>ribe their roles:<br>ibe your organization's predominant characteristics. Use mo<br>CANT (Sponsor)<br>Y Secondary School Student I Institutionalized (of<br>U College/University Student J Institutionalized (of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | tion?          | cates                   |
| i)<br>Circk<br>need<br>SET<br>G                                                                                                                                                                                                                                                                                            | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descrifted.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.                                                                                                                                                                                                                                                                                                                                                                | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>pribe their roles:<br>ibe your organization's predominant characteristics. Use mode<br>(Decision Student I Institutionalized (of<br>U College/University Student J Institutionalized (of<br>S Senior Citizen<br>E Mentally or Physically Impaired V Veteran                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | tion?          | cates                   |
| i)<br>Circk<br>Need<br>SET<br>G<br>N<br>A<br>B                                                                                                                                                                                                                                                                             | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>fe the categories below which descr<br>fed.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.<br>Note: Not to be used by individuals.)<br>American Indian/Alaska Native<br>Asian/Pacific Islander<br>Black, not Hispanic/Latino                                                                                                                                                                                                                                                                   | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>project Organizatio<br>projec | tion?          | cates                   |
| i)<br>Need<br>SET<br>G<br>N<br>A<br>B<br>H<br>W                                                                                                                                                                                                                                                                            | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descr<br>fed.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.<br>Note: Not to be used by individuals.)<br>American Indian/Alaska Native<br>Asian/Pacific Islander<br>Black, not Hispanic/Latino<br>Hispanic/Latino<br>V White                                                                                                                                                                                              | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>project Organization<br>proje | tion?          | cates                   |
| i)<br>Circle<br>Need<br>SET<br>G<br>N<br>A<br>B<br>H<br>W<br>C                                                                                                                                                                                                                                                             | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descr<br>fed.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.<br>Note: Not to be used by individuals.)<br>American Indian/Alaska Native<br>Asian/Pacific Islander<br>Black, not Hispanic/Latino<br>Hispanic/Latino<br>White<br>Child                                                                                                                                                                                       | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>tribe their roles:<br>ibe your organization's predominant characteristics. Use mode<br>(construction of the second student 1 institutionalized (of<br>U College/University Student 1 institutionalized (of<br>U College/University Student 1 institutionalized (of<br>S Senior Citizen<br>E Mentally or Physically Impaired V Veteran<br>D Hearing Impaired<br>Q Visually Impaired F Woman<br>P Otherwise Impaired                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | tion?          | categ                   |
| i)<br>Circk<br>SET<br>G<br>N<br>A<br>B<br>H<br>W<br>C<br>SET                                                                                                                                                                                                                                                               | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descr<br>fed.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.<br>Note: Not to be used by individuals.)<br>American Indian/Ataska Native<br>Asian/Pacific Islander<br>Black, not Hispanic/Latino<br>Hispanic/Latino<br>V White<br>Child<br>#2—TO BE FILLED OUT BY PROJECT<br>a General (adult, general characteristics.                                                                                                     | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>ribe their roles:<br>ibe your organization's predominant characteristics. Use models<br>(of the you                                                                                                                             | tion?          | yes<br>cate;<br>tional) |
| i)<br>Circk<br>SET<br>G<br>N<br>A<br>B<br>H<br>W<br>W<br>C<br>SET<br>G                                                                                                                                                                                                                                                     | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descr<br>fed.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.<br>Note: Not to be used by individuals.)<br>American Indian/Ataska Native<br>Asian/Pacific Islander<br>Black, not Hispanic/Latino<br>Hispanic/Latino<br>V White<br>Child<br>#2—TO BE FILLED OUT BY PROJECT<br>3 General (adult, general characteristics.<br>Note: Not to be used by individuals.)                                                            | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>tribe their roles:<br>ibe your organization's predominant characteristics. Use mode<br>(organization's predominant characteristics. Use mode<br>CANT (Sponsor)<br>Y Secondary School Student I Institutionalized (of<br>U College/University Student J Institutionalized (of<br>Cant Citizen<br>E Mentally or Physically Impaired V Veteran<br>D Hearing Impaired<br>Q Visually Impaired F Woman<br>P Otherwise Impaired<br>ORGANIZATION (If application is sponsored)<br>Y Secondary School Student I Institutionalized (or<br>U College/University Student J Institutionalized (or<br>Visually Impaired F Woman<br>P Otherwise Impaired<br>ORGANIZATION (If application is sponsored)<br>Y Secondary School Student I Institutionalized (or<br>U College/University Student J Institutionalized (or<br>V Secondary School Student I Institutionalized (or<br>V College/University Student J Institutionalized (or<br>V Secondary School Student I Institutionalized (or<br>V College/University Student J Institutionalized (or<br>V College/University Student J Institutionalized (or<br>V Secondary School Student J Institutionalized (or<br>V College/University S                                                                                                     | tion?          | yes<br>cate;<br>tional) |
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| i)<br>Circk<br>Need<br>SET<br>G<br>N<br>A<br>B<br>H<br>W<br>C<br>C<br>SET<br>G<br>N<br>N<br>A<br>B<br>B<br>H<br>W<br>C<br>C<br>SET<br>G<br>N<br>N<br>B<br>B<br>H<br>W<br>C<br>C<br>SET<br>B<br>B<br>H<br>W<br>C<br>C<br>SET<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B<br>B | Members of Inner City, Rural an<br>Indicate by number and percentage<br>organization's:<br>Staff #% Bo<br>Are members of ethnic minority grou<br>If yes, identify them and briefly desc<br>If yes, identify them and briefly desc<br>the categories below which descr<br>fed.<br>#1—TO BE FILLED OUT BY APPLI<br>General (adult, general characteristics.<br>Note: Not to be used by individuals.)<br>American Indian/Alaska Native<br>Asian/Pacific Islander<br>Black, not Hispanic/Latino<br>Hispanic/Latino<br>V White<br>Child<br>#2—TO BE FILLED OUT BY PROJECT<br>3 General (adult, general characteristics.<br>Note: Not to be used by individuals.)<br>4 American Indian/Alaska Native                         | the combined Native American, Asian, Black and Hispanic/La<br>pard # %<br>ups involved in decision-making roles in the Project Organization<br>pribe their roles:<br>ibe your organization's predominant characteristics. Use mode<br>(ibe your organization of the predominant characteristics. Use<br>(ibe your organization of the predominant characteristics. Use                                                                                                                            | tion?          | yes<br>Cates<br>tional) |

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| A     Solution of Applicant Organization or Sponsor:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 2. Name of Actual Project Organization (if sponsored);                                                                      |
| VASULKA CORPORATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                             |
| Permanent Mailing Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Permanent Mailing Address:                                                                                                  |
| 1600 OLD PECOS TRAIL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | L                                                                                                                           |
| Phone: 505-983.8128                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Phone:                                                                                                                      |
| County: SANTA FE COUNTY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | County:                                                                                                                     |
| Legislative District:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Legislative District:                                                                                                       |
| House 25 Senate 47                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | HouseSenate                                                                                                                 |
| Is Tax Determination Letter Included?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                             |
| Internal Revenue Service Employer Identification N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Number <u>16 - 1086 752</u>                                                                                                 |
| 3. PROJECT TITLE SOUTH WESTER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | EN LANDSCAPES                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                             |
| 5. PROJECT DESCRIPTION (Complete in space provided in space provided in space provided in space provided in the space provided in th |                                                                                                                             |
| a. PROJECT OBJECTIVES (State simply what you                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | wish to accomplish with this project)                                                                                       |
| A 30 MIN TAPE OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | BROADCAST QUALITY                                                                                                           |
| VIDÊO TA<br>PHASE II: ELECTRON<br>BOTH ANA<br>PHASE III: EDITING/<br>PHASE IV: COPYING<br>ART ÎNST<br>LOCATIONS BEING CON<br>RIO GRANDE GORGE<br>INDIAN RUINS (BA<br>SPANISH RUINS (B                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | E<br>INDELIER)<br>IUARAI)                                                                                                   |
| TOWNSCAPES (SANT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ) TELESCOPE (PLAINS OF ST. AUGUSTINE)<br>(A FE/TAOS)                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | · · · · · · · · · · · · · · · · · · ·                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | if Partial Funding is necessary? <u>VES</u> At what funding level could the project                                         |
| continue without seriously lowering its quality?<br>APPLICABLE FOR MINI-GRANT APPLICATION.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | $\underline{\mathcal{E}}$ $\underline{\mathcal{T}}$ (If desired, further explanation may be supplied on separate sheet.) NO |
| THE WORK WOULD NOT BE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | OF LOWER QUALITY, BUT SHORTER. PROPOSED NOW A<br>GUT, IT COULD BE 26 MIN. VORK FOR \$4,600, OR                              |

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39 MIN• WORK FOR \$6,000. IF CUT, 19 NÎN• WORK FOR \$2,000. ÊTC•

## **BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE GUIDELINES**

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Please submit the original and 3 copies of the cover letter (if applicable), the completed application form and the budget breakout. In addition, please submit 14 copies of all resumes, promotional sheets, reviews and other supporting material to the NMAD office. General Operating Grant Applicants: See the Guidelines regarding a letter of justification which must accompany an application for a General Operating Grant.

| NEW MEXICO ARTS DIVISION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Discipline: Media<br>NMAD # 86-14               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|
| Name of Applicant (or Sponsor):<br>The Vasulkas, Inc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2. Name of Project Organization (if sponsored): |
| Permanent Mailing Address:<br>Rt. 6, Box 100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Permanent Mailing Address:                      |
| City:         Santa Fe         State:         N.M.         Zip:         87501           Telephone:         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614         473-0614 | City: Zip: _<br>City: Zip: _<br>Telephone:      |
| County of Applicant: Santa Fe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | County of Project Organization:                 |
| Legislative District of Applicant:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Legislative District of Project Organization:   |
| House Senate47                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | House                                           |
| Congressional District of Applicant:3<br>Federal Employer Identification Number:16-1086752                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Congressional District of Project Org.:         |

#### ONE COPY OF THE TAX LETTER MUST BE INCLUDED WITH THE ORIGINAL COPY OF THE PROPOSAL

| З. | Project TitleSIX_SONGS (T        | Work Title)                  |                                                                |                                                                        |
|----|----------------------------------|------------------------------|----------------------------------------------------------------|------------------------------------------------------------------------|
| 4. | Grant Amount Requested from      | NMAD: \$_6,000.              | Project<br>_ Start Date: <u>9/1/86</u><br>(Must not exceed NMA | Project<br>End Date: <u>8/31/87</u><br>D funding year: 9/1/86–8/31/87) |
| 5. | Name of Authorizing Official:    | Woody Vasulka                |                                                                | Telephone:                                                             |
|    | -                                | (A Board Membercannot be sar | ne as Project Director)                                        |                                                                        |
|    | Address of Authorizing Official: | Rt. 6, Box 100, Santa Fe     | , N.M. 87501                                                   | <u></u>                                                                |
|    |                                  | Steina                       | Telephone: (H) _473-06                                         | <u>14</u> (O)                                                          |
|    | Address of Project Director:     | Rt. 6, Box 100, Santa Fe     | , N.M. 87501                                                   | ·                                                                      |
|    |                                  | ····                         |                                                                |                                                                        |
|    |                                  | erent than Project Director) | , ,                                                            |                                                                        |

| <ul> <li>6. Minorities and Special Constituency Information<br/>Please answer yes or no to the following:</li> <li>a) Is the applying organization minority-owned or minority-operated?</li> <li>b) Is the applying organization designed to serve a special audience?</li> </ul> | ☐ yes ⊠ no<br>☐ <b>yes ⊠ no</b>                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| If yes, please indicate who it serves<br>c) Are the applying organization's facilities or programs accessible to the<br>If yes, briefly explain howRamps                                                                                                                          | e handicapped? 🕱 yes 🗌 no                           |
| Circle the categories below which describe your predominant characterist                                                                                                                                                                                                          | ics. Use more than one category only if needed This |

#### SET #1-TO BE FILLED OUT BY APPLICANT (Sponsor)

information, while not required, enables NMAD to report to its funding sources.

- G General (adult, general characteristics.
- Note: Not to be used by individuals.)
- N American Indian/Alaska Native
- A Asian/Pacific Islander
- B Black, not Hispanic
- H Hispanic
- W White
- C Child

- Y Secondary School Student
- U College/University Student Senior Citizen
- S
- Ε Mentally or Physically Impaired
- D Hearing Impaired
- Q Visually Impaired
- P Otherwise Impaired

- 1 Institutionalized (other than correctional)
- J Institutionalized (correctional)
- V Veteran
- F Woman

### SET #2-TO BE FILLED OUT BY PROJECT ORGANIZATION (if application is sponsored)

- G General (adult, general characteristics. Note: Not to be used by individuals.)
- N American Indian/Alaska Native
- A Asian/Pacific Islander
- B Black. not Hispanic
- H Hispanic
- W White
- C Child

- Y Secondary School Student
- U College/University Student
- S Senior Citizen
- E Mentally or Physically Impaired
- D Hearing Impaired
- Q Visually Impaired
- Р Otherwise Impaired

- I Institutionalized (other than correctional)
- J Institutionalized (correctional)
- V Veteran
- (F) Woman

PAGE 2

### 7. PROJECT DESCRIPTION

Brief background information is necessary to understand the proposed project. Please state: (1) exactly what the project consists of; (2) by whom, for whom and how it will be carried out; (3) where and when it will take place; (4) specific communities to be served; and (5) who the principal artists for the project are. Commitments from all project personnel must be obtained and project dates should be set prior to submission of an application and must be verifiable. Complete in this space DO NOT continue on a separate sheet.

I am seeking funding for a *is* min. tape consisting of *inclust* songs' of approximately five min. each based on the forms of poetry, performance, music or painting.

I have been pursuing this methode of working mainly with voice and video recently in an interactive form of 'songs', (see 'Voice windows' with Loan La Barbara, the work submitted with this application). In this particular approach, I am opening myself to a new element in my work - the text - an element beyond my own abilities to provide. Furthermore, I have found an eagerness from writers, poets and musicians to cooperate with video and Judging from the already performed work (Voice Windows), there is an understanding audience for this genre.

Most of the work I intend to draw upon is already in existence, though some may be created for this project. Slince I do not intend to commission any new work, the fee for the collaboration is relatively modest, but as the tape goes into distribution, a share of the revenue will go to the artists. As for my potential collaborators, they are all living in this region, and with some I have already worked in the past. 8. OUTLINE OF PROJECT SCHEDULE (Actual start and end dates plus any other date that marks a significant step in the project)

Approximately one "Song" every 2 months

#### 9. PARTIAL FUNDING

a) Would you be interested in doing this project at a lower grant amount?

🗌 no

yes

b) At what dollar grant amount could the project continue without seriously lowering its quality? \$ 1,000.
 (Where applicable, more than one level of partial funding may be indicated. Projects will not be funded below the partial funding amount(s) set by you and those amounts cannot be changed once the application has been sent to the panel.)

Partial funding does not apply to General Operating Grants and Minigrants. Community Arts Challenge applicants should read the Guidelines regarding partial funding. Multidisciplinary applications must give a separate partial funding amount for each discipline.

c) In the case of partial funding, describe in the space below exactly what project changes would occur in activities and in the budget. If activities are reduced in scope, please describe how and say where in the budget costs would be reduced and by how much. If activities will not change because you plan to raise additional income, please indicate this.

Three "Songs" for \$3,000.

PROJECT INFORMATION

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10. How many artists will participate in the project? \_

11. In which counties will this project take place?

Santa Fe County

12. Give the total number of people in the general public (audience, participants, students) excluding employees and/or paid performers who will benefit directly from the project and break out the total figure.

If aired, a T.V. Audience; if distributed on cassette, a few thousand

13. In the space below please describe in 2 or 3 sentences the experience and qualifications of each of the key personnel in the project. Give name, role in project and background. Include artistic, technical and administrative personnel. ("See Attached Resume" IS NOT ACCEPTABLE.)

Steina (born in Iceland 1940) attended the Music Conservatory in Prague from 1959 to 1963, and joined the Icelandic Symphony Orchestra in 1964. She came to the United States the following year and has been a seminal force in the development of the electronic arts since 1970, both as co-founder of "The Kitchen", a major exhibition center in New York City, and as a continuing explorer of the possibilities for the generation and manipulation of the electronic image through a broad range of technological tools and aesthetic concerns. Her taoes have been exhibited and broadcast extensively in The States and Europe, a Guggenheim Fellow in 1976 and has received various other grants.

Since moving to Santa Fe New Mexico in 1980, she has produced series of Video Tapes relating to the land, and an installation titled "The West.

14. How will you evaluate this project? Who will do the evaluation and what criteria will you use in the evaluation?

In my own criteria, every of my work must be better than anything previously.

APPLICANT INFORMATION-In the case of sponsorship, information should apply ONLY to the project organization. If information is not available, please so indicate and leave this area blank.

15. a) When was your organization founded? \_\_\_\_\_1976

b) What are the principal activities and functions of your organization?

Fundraising for individual artists, with emphasis on technological arts

c) What is the geographic area served by your organization?

d) How many artists participated in your organization's activities during the previous year? 14

e) How many individuals benefitted (audience, students, etc.) from your activities during the previous year?

f) How many volunteers assisted your organization during the previous year?

16. IF THIS PROJECT IS SPONSORED, what is the sponsor's role in the proposed project? (e.g., fiscal agent) If the project is not sponsored, leave this section blank. NMAD recommends a written agreement between the sponsor and the project organization stating mutual obligations to this project.

N/A

#### 17. TOTAL ORGANIZATIONAL FISCAL SUMMARY

All applicants must fill in the following information. If unavailable for the project organization, the sponsoring organization should complete this.

| EXPENSE TOTALS: | Year:      | Last Year<br>Operating Expenses<br>84–85 | Present Year<br>Operating Expenses<br>85–86 | Next Year<br>Operating Expenses<br>86–87 |
|-----------------|------------|------------------------------------------|---------------------------------------------|------------------------------------------|
|                 | \$ Amount: | 36,622.40                                | 48,608.84                                   | 40,000.                                  |
| INCOME TOTALS:  | Year:      | Last Year<br>Operating Income<br>84–85   | Present Year<br>Operating Income<br>85-86   | Next Year<br>Operating Income<br>86–87   |
|                 | \$ Amount: | 36,293.21                                | 49,634.87                                   | 40,000.                                  |

20. FUNDING RECORD WITH NMAD-In the case of sponsorship, information should apply ONLY to the project organization. If information is not available, please so indicate and leave this area blank.

a. Do you have any other applications in this category currently on file with NMAD?

b. If you have more than one application submitted in this category, list your order of funding priority for the applications. (If a priority is not listed, it will be assumed no priority exists.)

N/A

Sponsor for T.L. Long

c. Has your organization applied in previous years to the New Mexico Arts Division for funding? If yes, please list project titles, years applied and grant award (if any) for each year of the past three years.

| YEARS                | PROJECT TITLE                                                      | \$ GRANT AWARD          |
|----------------------|--------------------------------------------------------------------|-------------------------|
| 1981                 | "South-Western Landscapes"<br>This title was changed to Summersalt | 2,000.                  |
| 1982                 | "The Commission"                                                   | 8,800.                  |
| 1983                 | "Sculptor-Sculptor"                                                | 2,800.                  |
| 1983                 | "Perspectives / Retrospectives"                                    | . "4,802.               |
| 198 <b>6</b><br>1986 | TIERRA MIA<br>VOCAL WINDOWS                                        | 6,000<br>3,500<br>3,000 |
| 1986                 | THREE SONGS                                                        | >,000                   |

21. ASSURANCES

/

If grant is awarded, applicant must give assurance to the NMAD that (1) Project covered by the application will be administered by and under supervision of the Applicant; (2) funds received will be used solely for the described project; (3) Applicant has read and will conform to the NMAD's general guidelines, application instructions and information, and (4) that filing of this application has been authorized by the governing body of the applicant organization. It is mutually agreed that all parties shall comply with Title VI of the Civil Rights Act of 1964; Fair Labor Standards under Section (i) and (j) of the National Foundation on the Arts and Humanities of 1965; Section 504 of the Rehabilitation Act of 1973; and Title IX, where applicable.

Signature of Authorizing Official (Board Member)

 WOODS
 VASULKA

 Typed Name of Authorizing Official

Signature of Project Director STEINA VASHLA Typed Name of Project Director

THE/VASULKÅS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASULKAS//RT/6//BOX/100//SANTA/FE//NEW/MEXICO//87501//USA//\*/THE/VASU

I

| PERSONNEL                                                                 |               | Cash  | IN KIND    |
|---------------------------------------------------------------------------|---------------|-------|------------|
| Artistic:<br>Technical/production:                                        | 3x <b>800</b> | 2,400 | 600<br>500 |
| OUTSIDE FEES AND SERVICES                                                 |               |       |            |
| Artistic:                                                                 | 3x290         | 600   |            |
| SPACE RENTAL                                                              |               |       | 250        |
| REMAINING OPERATING EXPENSES                                              |               |       |            |
| Production Supplies & Materials:                                          |               |       | /<br>150   |
| Equipment Rental: A fully equipped di<br>analog video/audio studio (mine) | gital/        |       | 2,000      |
| Other: (repairs ETC)                                                      |               |       | 158        |
|                                                                           |               | 3,000 | 3,650      |



New Mexico Arts Division

224 East Palace Avenue

Santa Fe, New Mexico 87501 (505) 827-6490

September 16, 1986

Joan La Barbara, Project Director VOCAL WINDOWS PO Box 1004 Pecos, New Mexico 87522

RE: NMAD Application #86-125 "Vocal Windows"

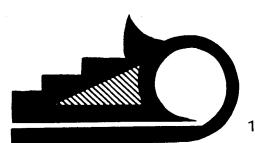
Dear Ms. La Barbara:

Now that your revised application (partial funding-\$3500) has been received and approved, please note the following enclosures:

1. <u>THE GRANT CONTRACT</u>, a legal, binding contract which is to be signed by the Authorizing Official and Project Director and returned to the Arts Division. Please keep one copy in your file for reference since this contract outlines your organization's responsibilities as a grant recipient. Any person involved with the administration, record keeping or promotion of your project must be aware of the terms of the contract and fulfill them. Please note that you are required to fill in your Federal Employer Identification Number on Page 1 of the contract.

2. <u>THE LABOR ASSURANCE FORM</u>, which must be signed by the Authorizing Official and returned to the Arts Division.

- 3. A FISCAL PACKET, which includes:
  - (a) A GUIDE FOR FISCAL PROCEDURES & CASH REQUESTS This is the key to the proper administration of your grant. Read it carefully and refer to it if you have questions about the fiscal portion of the project. If in doubt, call 827-6490 and ask for a Grants Coordinator.
  - (b) CASH REQUEST FORMS, which must be returned along with a narrative progress report in order to obtain funds. These should be sent to the Arts Division. Your Federal Employer Identification Number is required on this form.
  - (c) LETTER OF CREDIT FUNDING METHOD & CASH REQUEST DUE DATES The Letter of Credit funding method explains the system of payments under which the NMAD receives funding from the National Endowment for the Arts. This system of payments sets the timeline by which you must request your funds. There are no exceptions to this schedule. PLEASE READ IT!



## New Mexico Arts Division

113 Lincoln Avenue

Santa Fe, New Mexico 87501

(505) 827-2061 <u>きょう ゆ</u>タタの

October 20, 1981

Steina Vasulka, Project Director VASULKA CORPORATION 1600 Old Pecos Trail Santa Fe, New Mexico 87501

RE: NMAD #81-183

Dear Ms. Vasulka:

Now that the revised application has been received and approved, please find the following enclosures:

1. THE GRANT AGREEMENT, a legal, binding contract, to be signed by the Chief Administrative Officer and Project Director and returned to the Arts Division.Please keep one copy in your file for a reference, since this contract outlines your organization's responsibilities as a grant recipient. Any person involved with the administration, record keeping or promotion of your project must be aware of the terms of the contract and fulfill them. Please note that you are now required to fill in your IRS Employer Identification Number on the Grant Agreement, page 1. 16-1086752

2. THE LABOR ASSURANCE FORM, which must be signed by the Project Director and returned to the Arts Division. No grant funds will be released until this form is completed and on file with our office.

3. A FISCAL PACKET, which includes:

a) A GUIDE FOR FISCAL PROCEDURES. This memo is the key to the proper administration of your grant. Read it carefully and refer to it if you have questions about the fiscal portion of the project. If in doubt, call 827-2061 and ask for our Grants Coordinator.

b) CASH REQUEST FORMS, which must be filed along with a Narrative Progress Report in order to obtain funds. These forms are to be sent to the NMAD office. PLEASE NOTE: Your IRS Employer Identification Number is now required on this form.

c) THE KEEPING OF FISCAL RECORDS & SAMPLE LEDGER SHEETS, providing a suggested method for recording the expenditure of all funds related to the project. At the completion of your project these figures must be reported to the NMAD. -2- 10/20/81 - RE: NMAD #81-183

4. A PROJECT SCHEDULE. For record keeping and evaluation purposes, the proposed project schedule should list what activity will take place and when and where it will occur. Tentative dates should be listed as such, and the schedule should be updated periodically so that the NMAD is kept abreast of upcoming events.

It is essential that a project schedule be sent to the NMAD <u>BEFORE</u> any activity on this project takes place. THE GRANT AGREEMENT WILL NOT BE SIGNED BY THE DIRECTOR WITHOUT A PROJECT SCHEDULE, NOR WILL IT BE SIGNED RETROACTIVELY.

5. FINAL PROJECT REPORT, to be filed with the Arts Division within 30 days after the end of your project. This form is provided for the narrative portion of your report, describing and assessing your project in detail. Ledger sheets on all project fiscal activity including NMAD funds, cash match and in-kind match, will constitute the financial report of the project.

If you have any questions about these materials or about any aspects of administering your grant, please do not hesitate to contact this office. Our Grants Coordinator, Tisa Gabriel, will be glad to work with you on any problems that may arise. Our number is 827-2061, and alternate numbers are 827-5436 and 827-3186.

Sincerely,

Bernard B. Lopez Director

bbl;peg
enc.

A. 15.

| _ | ·   | 12-6141 | -037  |        |
|---|-----|---------|-------|--------|
|   | BSO | GRANT   | NUMBI | ĒR     |
|   | 16  | - 1086  | 752   |        |
|   | IRS | EMPLOY  | ER ID | NUMBER |

### GRANT AGREEMENT

### NEW MEXICO ARTS DIVISION

Vasulka Corporation hereinafter The known as the grantee), hereby signifies its acceptance of a project grant in the , Grant Number 81-183 , from the New Mexico Arts 2000 amount of \$\_ Division (NMAD). The grantee agrees to provide matching funds in the amount of at , either in cash or in-kind, for a total project cost of at 2000 least \$ 4000 least \$ The grant period will extend from 9/1/81 to 8/31/82

THE GRANTEE SHOULD UNDERSTAND THAT ACCEPTANCE OF AN AWARD CREATES A LEGAL DUTY ON THE PART OF THE GRANTEE TO USE FUNDS IN ACCORDANCE WITH THE TERMS OF THE GRANT AND TO COMPLY FULLY WITH ALL PROVISIONS AND CONDITIONS.

THE COMPLETED GRANT AGREEMENT, LABOR ASSURANCE FORM, AND PROJECT SCHEDULE MUST BE RETURNED TO THE NMAD BEFORE CASH REQUESTS WILL BE HONORED.

The grantee agrees to administer the grant in compliance with the following provisions:

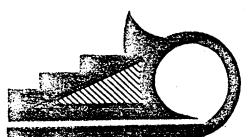
#### A. Cost Principles

Only those costs set forth in the project budget, as approved by the New Mexico Arts Division will be charged to this grant.

- Capital items: No funds from this grant will be used to purchase capital items - i.e., land, buildings, office equipment or other equipment, without prior written approval from the New Mexico Arts Division.
- 2. Per Diems: Per diems shall not exceed \$36.<sup>(\*)</sup>Less than one full per diem is divided into quarters. One night's lodging is one half a per diem. All motel and hotel receipts must be maintained by the grantee.

#### B. Cash Requests

- Requests may be made as needed but not to exceed the balance of the total grant, less twenty (20%) percent. Three weeks time is needed to process cash requests. The final twenty (20%) percent will be payable upon receipt of the final report and then only on the basis of claims outstanding. Exceptions must be approved by the NMAD.
- 2. No less than two (2) cash requests shall be made within the grant period. A brief narrative report shall accompany each cash request.
- 3. Cash request forms, furnished by the NMAD, must be completed and submitted to the Division office in order to obtain funds. The <u>final</u> cash request must be postmarked no later than July 31 of next year; otherwise, without exception, remaining funds relative to your grant will be redistributed by the Division. No expense may be incurred after the closing date of the grant period.
  - (\*) Per diem for <u>Farmington</u>, <u>Santa Fe</u>, <u>Taos</u> and <u>Albuquerque</u> shall not exceed \$44



## New Mexico Arts Division

113 Lincoln Avenue

Santa Fe, New Mexico 87501

(505) 827-2061

August 25, 1982

Woody Vasulka, Project Director THE VASULKAS, INC. 1600 Old Pecos Trail Santa Fe, New Mexico 87501

RE: NMAD #82-203 The Commission

Dear Mr. Vasulka:

The New Mexico Arts Division is pleased to inform you that your project has been awarded <u>partial</u> funding in the amount of \$8,806 as recommended by the Panel.

Due to partial funding, project revisions are necessary prior to the issuance of the Grant Agreement and accompanying funding packet. Budget revisions may be either increases in cash or in-kind match, reduction in the project costs or both. If project cash costs are reduced, the percentage of NMAD cash support should remain at least the same as in the original application.

We enclose an application form such as you originally submitted, which is to be filled out with revised information and returned to the Arts Division office promptly. The new project description should indicate what changes, if any, will occur in project activities; the new project budget page and budget breakout page(s) are to reflect revisions in the budget.

When your revised application is received and approved, we will send you a Grant Agreement for your signature and a Fiscal Packet for your careful use and study. Please return the pertinent information as soon as possible. NO PROJECT ACTIVITY MAY BEGIN UNTIL THE REVISED APPLICATION IS RECEIVED.

If you have any questions about your grant, please do not hesitate to contact this office. Our Grants Coordinators, Tisa Gabriel and Margaret Gold, will be glad to work with you on any problems that may arise.

Sincerely,

Bernard B. Lopez Director

bbl;peg enc.

NMAD Project #

FINAL PROJECT REPORT

| Organization THE VASULKAS, INC<br>Project Title SOUTH -WESTEEN LANDSCAPSS<br>Project Director STEINA<br>Location(s) of Project SANTA FE COUNTY, SAN MIGHEL COUNTY |                                                                                     |                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------|
| 1. Audience Development.                                                                                                                                          | (Estimate as accurate                                                               | ly as possible)              |
| Total Attendance                                                                                                                                                  | Adults                                                                              | Children                     |
| Location and Population of<br>"SOUTH-WESTERN LAND<br>USA NETWORK, A SATE<br>"NIGHTFLIGHT" ON MA<br>BEEN SHOWN IN VARIO<br>STATE TELEVISION (S                     | SCAPES" VERE SHOWN<br>LITE CABLE NETWORN<br>Y 28 & 29, 1982 A<br>US FESTIVALS AS WE | CON THE PROGRAM              |
| 2. Number and Kinds of Sp<br>institutionalized persons,<br>and those in geographically<br>N.A.                                                                    | the elderly, ethnic g                                                               | roups, lower-income persons, |

3. How many Artists were actually involved in the project:

Professional (full-time employment as an artist)

Semi-professional (professionally trained, working at some other job)

Amateur (not professionally trained)

4. <u>New Funding Resources</u>. (Detail the extent to which funds and services were generated from new sources--foundations, corporations, local or county government, other Federal sources, etc.)

THE WORK ON "SOUTH-WESTERN LANDSCAPES" INSPIRED ME TO DEVELOPE A LARGER WORK, TENTATIVELY TITLED "EARTHWORKS". I HAVE RECEIVED FUNDING FROM NEA AND THE ROCKEFELLER FOUNDATION TO PRODUCE A 1/2 HOUR VIDEO TAPE. 5. Assessment and Description of Project in Detail. Describe the project as it actually happened--as compared with what you planned originally. Describe the evaluation method you used, and your findings. If you were to do this project again, what changes would you make, if any? Include any information you feel is important. Continue on back of this sheet if necessary.

THE PROJECT PROCEEDED AS STATED IN THE PROPOSAL:

| PHASE | I:   | IMAGE GATHERING THROUGH MOTORIZED/OPTICAL |
|-------|------|-------------------------------------------|
|       | ·    | DEVICES WITH PORTABLE COLOR CAMERA AND    |
|       |      | VIDEO TAPE RECORDER.                      |
| PHASE | II:  | ELECTRONIC PROCESSING OF THIS MATERIAL BY |
|       |      | BOTH ANALOG AND DIGITAL MEANS.            |
| PHASE | III: | EDITING/TITLING ETC TO A 30 MIN. MASTER.  |
|       | -    |                                           |

PHASE IV: COPYING AND DISTRIBUTION TO T.V. STATIONS, ART INSTITUTIONS, UNIVERSITIES, LIBRARIES, ETC.

SOUTH-WESTERN LANDSCAPES, A 20 MIN. TAPE IS IN FIVE SEQUENCES: "LOW RIDE", SKY HIGH". "SOMERSAULT", "REST" AND "PHOTOGRAPHIC MEMORY".

IT HAS WON THOSE AWARDS: ITHACA VIDEO FESTIVAL: "SOMERSAULT" ATHENS FILM/VIDEO FESTIVAL: "LOW RIDE", "SOMERSAULT", "REST" SAN FRANCISCO INTERNATIONAL VIDEO FESTIVAL: "SKY HIGH","LOW RIDE"

A REVIEW ON "SOMERSAULT" BY AMY GREENFIELD IS ATTACHED TO THIS REPORT.

Prepared by: STEINA

Phone: 983.8128 Address: 276, 80x 100 SANTA FE, 87501



## New Mexico Arts Division

224 East Palace Avenue Santa Fe, New Mexico 87501 (505) 827-6490

August 25, 1986

Steina Project Director THE VASULKAS, INC. Rt. 6, Box 100 Santa Fe, NM 87501

> Re: NMAD Application #86-148 Six Songs

Dear Steina:

The New Mexico Arts Division is pleased to inform you that the above project has been awarded partial funding in the amount of \$3,000 as recommended by the Panel.

Because this project has received only partial funding, it is necessary for you to conform project plans on your NMAD grant application to the lower level of funding before we can issue a Grant Contract and accompanying funding packet. Budget revisions may be either increases in cash or in-kind match, reduction in the project costs, or both. If costs are reduced, the percentage of NMAD cash support to the overall project expense should remain at least the same as in the original application.

Enclosed is an application form such as you originally submitted. <u>Complete</u> all of <u>Page 1</u> (remember to put the partial funding award amount in #4). <u>Revise</u> <u>Page 3</u>, the Project Description, to reflect any reduction in activity, and revise Page 4. Please update the Project Schedule (#8), and note any changes for questions #10 (number of artists), #11 (counties in which the project will take place), and #12 (how many people will benefit from the project). <u>Revise Page 7</u> (Proposed Project Budget) and type a revised Budget Breakout which reflects changes in the budget due to partial funding. Please remember <u>signatures</u> are <u>necessary</u> on Page 9 from the Authorizing Official and the Project Director for the revised application. When your revision is received and approved, we will send you a Grant Contract for your signature and a Fiscal Packet for your careful study and use.

BSG GRANT NO. 87-6141-0024

85-030025 FEDERAL EMPLOYER ID NUMBER

### GRANT CONTRACT NEW MEXICO ARTS DIVISION

The ApplicantThe Vasulkas, Inc., (hereinafter)known as the grantee) hereby signifies the acceptance of a project grant in the amount of, from the New Mexico Arts Division,\$ 4500, Application Number87-110, from the New Mexico Arts Division,(NMAD). The grantee agrees to provide matching funds in the amount of at least \$ 4500either in cash or in-kind, for a total project cost of at least \$ 9000either in cash or in-kind, for a total project cost of at least \$ 9000. The grantperiod will extend from9/1/87to8/31/88.

THE GRANTEE SHOULD UNDERSTAND THAT ACCEPTANCE OF A GRANT AWARD CREATES A LEGAL DUTY ON THE PART OF THE GRANTEE TO USE FUNDS IN ACCORDANCE WITH THE TERMS OF THE GRANT AND TO COMPLY WITH ALL PROVISIONS AND CONDITIONS.

THE COMPLETED GRANT AGREEMENT, LABOR ASSURANCE FORM, AND PROJECT SCHEDULE MUST BE RETURNED TO THE NMAD BEFORE CASH REQUESTS WILL BE HONORED.

The grantee agrees to administer the grant in compliance with the following provisions:

#### A. Cost Principles

Only those costs set forth in the project budget, as approved by the New Mexico Arts Division will be charged to this grant.

- Capital items: No funds from this grant will be used to purchase capital items, i.e., land, buildings, office equipment or other equipment, without prior written approval from the New Mexico Arts Division.
- Per Diems: Generally per diems shall not exceed \$48. Less than one full per diem is divided into quarters. One night's lodging is one half a per diem. All motel and hotel receipts must be maintained by the grantee.

## B. Cash Requests

- Requests may be made as needed but not to exceed the balance of the total grant, less twenty (20%) percent. Three weeks time is needed to process cash requests. The final twenty (20%) percent will be payable upon receipt of the final report and then only on the basis of claims outstanding. Exceptions must be approved by the NMAD.
- No less than two (2) cash requests shall be made within the grant period. A brief narrative report shall accompany each cash request.
- 3. Cash request forms, furnished by the NMAD, must be completed and submitted to the Division office in order to obtain funds. The <u>final</u> cash request must be postmarked no later than July 31 of next year; otherwise, remaining funds relative to your grant may be redistributed by the Division. No expense may be incurred after the closing date of the grant period.

The grantee acknowledges registration with the State of New Mexico Attorney General's Office in compliance with the Charitable Organizations and Solicitations Act (57-22-1 to 57-22-11 NMSA 1978).

The grantee certifies that it is a non-profit organization entitled to tax exempt status, and that it will administer the grant in compliance with the provisions of Title VI of the Civil Rights Act of 1964 (42 USC 2000d et. seq.), Section 504 of the Rehabilitation Act of 1973 (29 USC 794) and, where applicable, Title IX of the Education Amendments of 1972 (20 USC 1681, et. seq.).

Title VI of the Civil Rights Act of 1964 bars discrimination or exclusion from the program on the grounds of race, color or national origin. Section 504 of the Rehabilitation Act of 1973, provides for non-discrimination in federally assisted programs on the basis of handicap. Subject to certain exceptions, Title IX of the Education Amendments of 1972, prohibits the exclusion of persons on the basis of sex in any education program or activity receiving federal financial assistance. The Applicant hereby gives assurance that it will immediately take any measures necessary to comply.

This assurance shall obligate the Applicant for the period during which the federal financial assistance is extended. Also, this assurance is given in connection with any and all financial assistance received from the Endowment after the date this form is signed. This in cludes payments after such date for financial assistance approved before such date. The Applicant recognizes and agrees that any such assistance will be extended in reliance on the representations and agreements made in this assurance, and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant, its successors, transferees, and on the authorized official whose signature appears below.

| appears berow.                       | * * * * * * *                                                |
|--------------------------------------|--------------------------------------------------------------|
| DATE: 10-9-87                        | Signed: Project Director                                     |
|                                      | Address: RG, BOX 100                                         |
|                                      | SAW7A PE, N.M. Zip 8750/<br>Phone: 505 4730614               |
| DATE: 10-9-87                        | Signed: Stern Jacobs                                         |
|                                      | Authorizing Official                                         |
|                                      | Address: RTG, Box 100                                        |
|                                      | SANTAFE N.M Zip 87501                                        |
|                                      | Phone: 505 473 0614                                          |
| Other has been and a manual la there |                                                              |
| Check to be made payable to:         | (*) THE VASULKAS, INC.                                       |
| Check to be mailed to:               | Name: THE VASULICAS INC,                                     |
|                                      | Title:                                                       |
|                                      | Address: RTG, BOX 100 FE Zip 87501                           |
| DATE: 10/13/187                      | Signed:                                                      |
|                                      | Director, New Mexico Arts Division                           |
| (*) In the case of a sponsor         | ring organization, checks must be made payable to and mailed |
| to the sponsoring organi             |                                                              |

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# New Mexico Arts Division

224 East Palace Avenue

Santa Fe, New Mexico 87501 (505) 827-6490

September 23, 196

Steina Vasulka, Project Director THE VASULKAS, INC. Rt. 6, Box 100 Santa Fe, New Mexico 87501 RE: NMAD Application #86-148

"Six Songs (Work Title)

Dear Ms. Vasulka:

Now that your application (partial funding-\$3000) has been received and approved, please note the following enclosures:

THE GRANT CONCTRACT, a legal, binding contract which is to be signed 1. by the Authorizing Official and Project Director and returned to the Arts Division. Please keep one copy in your file as a reference since this contract outlines your organization's responsibilities as a grant recipient. Any person involved with the administration, record keeping and promotion of your project must be aware of the terms of this contract and fulfill them. Please note that you are required to fill in your Federal Employer Identification Number on Page 1 of the contract.

2. THE LABOR ASSURANCE FORM, which must be signed by the Authorizing Official and returned to the Arts Division.

A FISCAL PACKET, which includes:

- (a) A GUIDE FOR FISCAL PROCEDURES AND CASH REQUESTS This is the key to the proper administration of your grant. Read it carefully and refer to it if you have questions about the fiscal portion of the project. If in doubt. call 827-6490 and ask for a Grants Coordinator.
- CASH REQUEST FORMS, which must be returned along with a (b) narrative progress report in order to obtain funds. These should be sent to the Arts Division. Your Federal Employer Identification Number is required on this form.
- (c) LETTER OF CREDIT FUNDING METHOD & CASH REQUEST DUE DATES The Letter of Credit funding method explains the system of payments under which the NMAD receives funding from the National Endowment for the Arts. This system of payments sets the timeline by which you must request your funds. There are no exceptions to this schedule. PLEASE READ IT!

A Division of the Office of Cultural Affairs

4. <u>A PROJECT SCHEDULE</u>. For record keeping and evaluation purposes, the Project Schedule should list what activity will take place and when and where it will occur. Tentative dates should be listed as such and the schedule must be updated periodically to keep NMAD project evaluators abreast of upcoming events in order for project evaluations to be planned.

The signed Grant Contract, the signed Labor Assurance Form and the Project Schedule must be returned to this office as soon as possible. NO GRANT FUNDS WILL BE RELEASED UNTIL THESE FORMS ARE COMPLETED AND ON FILE WITH THIS OFFICE.

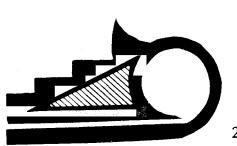
- 5. <u>A FINAL REPORT PACKET</u>, which includes:
  - (a) A FINAL NARRATIVE PROJECT REPORT, which must be filed with the Arts Division <u>WITHIN 30 DAYS AFTER THE END OF YOUR</u> <u>PROJECT</u>. This form is provided for the narrative portion of your project. The narrative describes and assesses the project in detail.
  - (b) THE KEEPING OF FISCAL RECORDS & SAMPLE LEDGER SHEETS, which provide a method for recording the expenditures of all funds related to the project. At the completion of your project, these figures must be reported to the NMAD. Ledger sheets on all project fiscal activity including funds from the NMAD, cash match and in-kind match, will constitute the financial report of the project. Ledger sheets must accompany the final narrative report. For uniformity of reporting, YOU MUST SUBMIT THE FINAL FINANCIAL REPORT IN THE FORMAT USED ON THE SAMPLE LEDGER SHEET. ANY EXCEPTIONS TO THE SAMPLE FORMAT MUST BE APPROVED PRIOR TO BEGINNING THE PROJECT.

If you have any questions about the enclosed forms or procedures or about any aspect of administering your grant, please do not hesitate to call this office. Our Grants Coordinators, Lynn Magruder and Margaret Gold, will be glad to work with you. Our number is 827-6490.

Sincerely, ~ Gelenil &

TISA GABRIEL Director

tg/peg enc.



# New Mexico Arts Division

224 East Palace Avenue Santa Fe, New Mexico 87501 (505) 827-6490

August 25, 1983

Steina Vasulka, Project Director THE VASULKAS. INC. Rt. 6, Box 100 Santa Fe, New Mexico 87501 RE: NMAD Application #83-190

Dear Ms. Vasulka:

We are pleased to inform you that your project "Explorations," has been awarded full funding in the amount of \$3500, as recommended by the Panel. In this regard, please note the following enclosures:

1. THE GRANT CONTRACT, a legal, binding contract, which is to be completed, signed by the Authorizing Official and Project Director and returned to the Arts Division. Please keep one copy in your file as a reference, since this contract outlines your organization's responsibilities as a grant recipient. Any person involved with the administration, record keeping or promotion of your project must be aware of the terms of the contract and fulfill them. Please note that you are required to fill in your Federal Employer Identification Number on the Contract, page 1.

THE LABOR ASSURANCE FORM, which must be signed by the Project 2. Director and returned to the Arts Division. No grant funds will be released until this form is completed and on file with our office.

3. A FISCAL PACKET, which includes:

a) A GUIDE FOR FISCAL PROCEDURES AND CASH REQUESTS. This is the key to the proper administration of your grant. Read it carefully and refer to it if you have questions about the fiscal portion of the project. If in doubt, call 827-6490 and ask for a Grants Officer.

b) CASH REQUEST FORMS, which must be filed along with a Narrative Progress Report in order to obtain funds. These forms are to be sent to the NMAD office. PLEASE NOTE: Your Federal Employer Identification Number is required on this form.

c) THE KEEPING OF FISCAL RECORDS & SAMPLE LEDGER SHEETS, providing a suggested method for recording the expenditure of all funds related to the project. At the completion of your project these figures must be reported to the NMAD. For uniformity of reporting, YOU MUST SUBMIT THE FINAL FINANCIAL REPORT IN THE FORMAT USED ON THE SAMPLE LEDGER SHEETS.

A Division of the Office of Cultural Affairs

| •          |          | •                   |       | Date: July 1          | 6, 17, 18, 1986 |
|------------|----------|---------------------|-------|-----------------------|-----------------|
| •          | PANEL    | RECOMMENDATION      | SHEET | Program Area:         | MEDIA           |
|            | •        | •                   | •     | Request:              | \$6,000         |
|            | •        | 1986-87             | •     | Panel.<br>Recommends: | \$ 3,000.       |
|            |          | •                   | •     | •                     |                 |
| Applicant: | THE V    | ASULKAS, INC.       | • ·   |                       | Nc. 25- 148     |
| Project Ti | itle: _" | Six Songs (Work Tit |       |                       | <u>.</u>        |

Reasons for panel recommendation:

The Panel recommends partial funding in the amount of \$3,000 for this project. The Panel was impressed with the artistic integrity of the presentation and voted to recommend it to result in three presentations. The sample expressed by far the highest level of video virtuosity the Panel reviewed. The Panel felt the trilogy was an optimum with regard to this proposal and hopes this project will be widely disseminated.

|              | e with the Commission's Conflict of       | <u> </u>    | •      |
|--------------|-------------------------------------------|-------------|--------|
|              | abstained from voting on the application: |             |        |
| Panel Chairm | az: Jack Loeffler                         | Ş vote _    | 3,000. |
| Panelist     | Miguel Gandert Mynall H                   |             | 3,000. |
| Panelist     | Feggy Hessing Prov Hesh                   | - șvote     | 3,000. |
| Panelist     | Jim Patterson Jun Pattern                 | <br>Ş vote  | 3,000. |
| Panelist     | Rae Sasmor Cue Samo                       | <br>s vote  | 3,000. |
| Panelist     | Don Stebbins                              | <br>Ş vote  | 3,000. |
| Panelist     |                                           | <br>\$ vote |        |
|              |                                           | _ \$ vcte _ |        |



Office of Cultural Affairs
NEW MEXICO ARTS DIVISION

224 East Palace Avenue

Santa Fe, New Mexico 87501

(505) 827-6490

GARREY CARRUTHERS Governor

May 31, 1990

Steina Vasulka The Vasulkas, Inc. Rt. 6, Box 100 Santa Fe, NM 87501

Re: NMAD Application #89-201 Sonic Mirror Fiscal Agent for David Dunn #89-205 Video Fish on Friday Fiscal Agent for Daryn Curtis Hoffman #89-305 Geomancy: East and West Fiscal Agent for Joan Price #89-306 The Other Side Fiscal Agent for Robert Althouse #89-301 The Breaking Fiscal Agent for Trevor Long

Dear Ms. Vasulka:

This letter is a reminder that final reports for all 1989-90 grants (grant period ending August 31, 1990) are due September 30, 1990. The Division cannot process a cash request for the final 20% of your grant until the final report has been received.

The Division cannot consider an extension to the September 30 deadline unless a written request for an extension is submitted by the applicant. The Endowment has made it clear to us that they prefer that we receive all cash requests and draw down money by October 1.

The Division must submit its detailed final report to the National Endowment for the Arts on November 30, 1990. The funding that the Division receives from the Endowment will be jeopardized if we cannot comply with their requirements.

In turn, we must require that final reports be submitted to us on a timely basis. Failure to do so will jeopardize future requests from your organization.

Sponsoring organizations are responsible for fulfilling the terms of the grant contract between the project organization and the New Mexico Arts Divison, and should be monitored accordingly.

If you have questions, please contact Nadine Stafford or Bill Baca in our Grants office.

Yours truly Morrow tara C

Director

|                                                                                                                                                                                    |                                              | PROJECT B        | UDGETONLY                           |                                                                  | . ( j                                                                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------|-------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                    | REQUEST OF<br>NMAD                           | IN-KIND<br>MATCH | CASH<br>MATCH                       | PROJECT<br>TOTAL                                                 | PROJECT CASH SOURCES<br>Earned Income: <u>4,800</u><br>Contributions:                                                                                                              |
| ARTISTIC EXPENSE<br>Personnel<br>Supplies and materials<br>Equipment Rental<br>Equipment Purchase<br>Travel<br>ADMINISTRATIVE EXPENSE<br>Personnel<br>Promotion & Adv.<br>Printing |                                              | 21,500           | 19,400<br>2,200<br>18,400<br>1,800  | 19,400<br>2,200<br>39,900<br>1,800                               | Private Foundation<br>Grants*:<br>City or County<br>Funds:<br>Other Federal<br>Grants*:25,000<br>NMAD:12,000<br>TOTAL CASH INCOME<br>FOR PROJECT: <u>41,800</u><br>*Specify Source |
| Supplies<br>Rental/Facilities<br>OTHER<br>TOTAL EXPENSE                                                                                                                            | 12,000                                       | 21,500           | 41,800                              | 12,000                                                           |                                                                                                                                                                                    |
| opendade and opender to be assessed                                                                     | an land on the states of the                 |                  | a constant of the particular of the | And the second of the second of the                              |                                                                                                                                                                                    |
| A. EXPENSES<br>Artistic Expenses<br>Administrative Expenses                                                                                                                        | Next F<br>From: <u>4-1-</u><br>53, 6<br>5, 6 | vv               | From: <u>4-1</u><br>2.9,<br>4.      | iscal Period<br><u>8/</u> To: <u>3-3/-82</u><br>264.0/<br>457,82 | Most Recent<br>Completed Fiscal Period<br>From: <u>4-1-80To: 3-31-81</u><br>11, 879,13<br>5, 237,69                                                                                |
| TOTAL<br>B. REVENUES<br>Earned Income                                                                                                                                              |                                              | 58,000           |                                     | 721,83<br>859.52                                                 | <i>17,116.82.</i><br><i>4,095.47</i>                                                                                                                                               |
| Contributions<br>Private Foundation Grants<br>City or County Funds<br>Federal Grants                                                                                               | 1, 67<br>20, 07<br>12, 67                    | 10<br>10<br>10   |                                     | 507)                                                             | 12, 600.00                                                                                                                                                                         |
| Other<br>TOTAL                                                                                                                                                                     | 20,00<br>58.00                               |                  |                                     | 500<br>562.31<br>12.1.83                                         | 12,0001.00                                                                                                                                                                         |

#### 8. PROJECT CRITERIA

A. How many artists will be involved (employed, trained, etc.) in the Project:-

|    | Professional                                                                                                                                                                                                                                              | Semi-Professional                                                                                                                                                                                                                                                                                                                     | Amateur                                                                                                                                                                                                                                                                                                                           |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8. | Describe experience and qualific                                                                                                                                                                                                                          | cations of personnel administering the Project.                                                                                                                                                                                                                                                                                       | BOHUSLAV WOODY VASULKA                                                                                                                                                                                                                                                                                                            |
|    | GRADUATED 1956; I<br>FREE-LANCE FILM I<br>YORK AT BUFFALO,<br>KITCHEN, NEW YORI<br>1969. CONCEPTUAL<br>IMAGING TOOLS IN                                                                                                                                   | MOTION PICTURE FILM ACA<br>EDITOR AND ADVISOR, 1964-<br>ASSOCIATE PROFESSOR SINCI<br>K, 1971; WORK WITH ELECTRO<br>IZATION, BUILDING AND APPI                                                                                                                                                                                         | 1971 TO PRESENT. HIS VIDEO                                                                                                                                                                                                                                                                                                        |
|    |                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                       | vill benefit directly from the Project? MORE, IF                                                                                                                                                                                                                                                                                  |
| 0  | ISTRIBUTED ON A                                                                                                                                                                                                                                           | ir, less if on CABL                                                                                                                                                                                                                                                                                                                   | EONLY                                                                                                                                                                                                                                                                                                                             |
|    | Is this project essentially:                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                   |
|    | New Conti                                                                                                                                                                                                                                                 | inuing K Continuing with c                                                                                                                                                                                                                                                                                                            | hanges (for your own organization)?                                                                                                                                                                                                                                                                                               |
| Ε. | Have you applied previously to the                                                                                                                                                                                                                        | he NMAD for funding for the same or essentiall                                                                                                                                                                                                                                                                                        | y the same Project? <b>XO</b> Year(s)                                                                                                                                                                                                                                                                                             |
| F. | Please include a project/progra<br>4 To 5 consecu                                                                                                                                                                                                         | m schedule, indicating start date, significant                                                                                                                                                                                                                                                                                        | milestones, such as performance dates, finish date, etc.<br>T - PRODUCTION STUDIO.                                                                                                                                                                                                                                                |
|    | COLLEAGUES A<br>PROJECT, TO<br>GUSELLA, AN                                                                                                                                                                                                                | ND COUNTLESS EUROP                                                                                                                                                                                                                                                                                                                    | EOUGHOUT THIS<br>ERT ASHLEY, ERNEST<br>V LA BARBARA, MORTON                                                                                                                                                                                                                                                                       |
| 9  | ORGANIZATION INFORMATION                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                   |
| ۵  | When founded? 1975                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                   |
| 8. | Principal Activities and Futto<br>PROCESSES OF SOUND<br>AND APPLICATION ON<br>TO CONDUCT RESEARC<br>AUDIO AND VIDEO SY<br>SOURCE OF ELECTROM<br>ESTABLISH, MAINTAN<br>INTO ALL THE VARIO<br>AND INTERACT WITH<br>AS A CENTER FOR TH<br>HUMANISTIC APPROAC | RAISE FUNDS TO FACILITATE<br>O AND IMAGE FORMING, DIREC<br>N TEMPORARY ARTS, FOR THE<br>CH INTO CONCEPTS AND DESIG<br>(NTHESIZERS AND THEIR COMP<br>NIC ARTS PUBLICATION AND G<br>IN, SUPPORT, AND ADMINISTE<br>DUS CODES AND MODES OF MED<br>EACH OTHER AND WITH THEIR<br>HE DEVELOPMENT, DEMOSTRATION<br>CH TO SYSTEMS OF COMMUNICA | L RESEARCH INTO TECHNOLOGICAL<br>TED TOWARD THEIR UTILIZATION<br>CULTURAL BENEFIT OF THE PUBLIC<br>ONS OF ELECTRONIC ART TOOLS -<br>PUTER CONTROL. TO SERVE AS RE-<br>BENERAL ART POLICY-SETTING. TO<br>ER THE STUDY OF, AND RESEARCH<br>DIA BY WHICH MEN COMUNICATE<br>CENVIRONMENTS, AND TO SERVE<br>ION AND DISSEMINATION OF A |
| C. | . Geographical area served. (City                                                                                                                                                                                                                         | , County, etc.) VIDEO TAPES SHOW!                                                                                                                                                                                                                                                                                                     | N IN THE U.S., EUROPE, JAPAN                                                                                                                                                                                                                                                                                                      |
| D  |                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                       | # 13 Semi-Prof.: Amat                                                                                                                                                                                                                                                                                                             |
| E  | . Number of people served (audie                                                                                                                                                                                                                          | ence, customers, students, etc.) in past year $\_$ A                                                                                                                                                                                                                                                                                  | VOT KNOWN                                                                                                                                                                                                                                                                                                                         |
| F  | Number of volunteer workers_                                                                                                                                                                                                                              | O                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                   |
| 1( | 0. DESCRIBE THE ROLE THE SPO                                                                                                                                                                                                                              | ONSORING ORGANIZATION WILL HAVE FOR T                                                                                                                                                                                                                                                                                                 | HIS PROJECT.<br>                                                                                                                                                                                                                                                                                                                  |
|    |                                                                                                                                                                                                                                                           | bracal, 2 gabrigat.                                                                                                                                                                                                                                                                                                                   | g'- might souria                                                                                                                                                                                                                                                                                                                  |
|    |                                                                                                                                                                                                                                                           | (Engont ser)                                                                                                                                                                                                                                                                                                                          | nist                                                                                                                                                                                                                                                                                                                              |

in the restance of

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- 11. Have you filed a copy of this application with your local Community Arts Agency? YES (See list in Guidelines)
  12. A. Do you have any other applications currently on file with the New Mexico Arts Division? MO (If the answer is YES) list below, giving project title and amount requested. Continue on separate sheet if necessary.)
  13. Please indicate the order of priority your organization has established for applications currently on file. (See the Guidelines on Multiple Project applications.)
  14. Please indicate the order of priority your organization has established for applications currently on file. (See the Guidelines on Multiple Project applications.)
  15. In addition to applications already on file, do you intend to apply for additional NMAD grant assistance? Please specify.
  - D. Have you applied in previous years to the NMAD for funding? If so, list project titles, years applied, and amount of funding (if any) for each of the past five years.

SOUTH-WESTERN LANDSCAPES 1981 2,000

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| istered by and under supervision of the Applicant                                                   | ist give assurances to the NMAD that: (1) Project covered by the application will be admin-<br>t. (2) funds received will be used solely for the described project; (3) Applicant has read and |
|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| will conform to the NMAD's general guidelines.<br>authorized by the governing body of the applicant | application instructions, and information; and (4) that filing of this application has been                                                                                                    |
| Stern Vaent Ko                                                                                      | - CKINTUD                                                                                                                                                                                      |
| Authorizing Board Official<br>Address and Phone 1600 OLO P                                          | ECOS TRAIL Address and Phone SAME                                                                                                                                                              |
| SANTA FE, NM 87                                                                                     |                                                                                                                                                                                                |
| Please indicate the name and phone no. of                                                           | someone who can be readily contacted regarding any questions about this application                                                                                                            |
| STEINA                                                                                              | 505.982.8128                                                                                                                                                                                   |
| Name                                                                                                | Phone                                                                                                                                                                                          |

#### THE COMMISSION يسرونها والمدارية والمراجب سالم مراجع فالمتحج المتحج فالمحجج

#### n e su a contra de la contra de AN ELECTRONIC OPERA

THROUGH MY PAST EXPERIMENTAL WORK WITH ACTUAL SOUND-ACTOR-LIGHT EXPLORATION OF THEATRICAL SPACE, I HAVE GRADUALLY ARRIVED AT A DEFINITION OF ELECTRONIC STAGES A SYNTHETIC PRO-DUCT OF ELECTRONIC MEDIA (SEE SAMPLER), USING SCULPTURE, LIGHT, MECHANIZED CAMERA MOVEMENT AND ELECTRONIC IMAGE PROCESSING. THIS I HOPE TO EXPRESS IN "THE COMMISSION".

THE SYNOPSIS INDICATE THAT A PHENOMENA OF PAGANINI IS EXPLORED HERE IN A THOROUGH MEDIA CONCEPT, AND IT'S HISTORICAL SETTINGS TRANSCEND INTO ELECTRONIC SPACE. IT USES A FEW LIFE PROTÁGONISTS NAMELY ERNEST GUSELLA AS PAGANINI, ROBERT ASHLEY AS HECTOR BERLIOZ, COSIMO CORSANO AS THE MORTICIAN AND BEN HARRIS AS PAGANINI'S SON, THE CONCEPT AND DESIGN OF STAGE IS BY HRADFORD SMITH, ALL VIDEO PRODUCTION INCLUDING COMPUTER IMAGING AND SOUND IS BEING DONE IN MY FACILITY. · · · ·

ONE THING THAT MAKES ME CONFIDENT ABOUT THE SCALE OF THIS WORK WITH ELECTRONIC NARRATIVITY, IS THE ACCESS TO MY.... OWN COMPUTERIZED IMAGE FACILITY, WHICH GIVES NE UNRESTRAINED WORK TIME. HOWEVER, BECAUSE OF THE COMPLEXITY AND MULTIPLE RE-GENERATION AND THEREFORE DEGENERATION OF THE SIGNAL, IT IS NECESSARY TO HAVE A FEW DAYS! ACCESS TO A ONE INCH POST-PRODUCTION STUDIO, WHERE I CAN FINECUT THIS 60 MIN. WORK TO A HROADCASTABLE QUALITY.

> பித்தால் பட்சுதி கிடாகன் துக்றிற்கால WOODY VASULKA

> > Section States

ONLY COMMUNITY CHALLENGE, GENERAL SUPPORT AND MAJOR ORGANIZATION APPLICANTS FILL IN THIS FORM. Include proposed project figures from previous page in next year's expenses and revenue.

## **19. TOTAL ORGANIZATION FISCAL ACTIVITY**

| EXPENSES                                                         | Last Year<br>Operating Expenses<br>Yr. ending | Present Year<br>Operating Expenses<br>Yr. ending |  |
|------------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------|--|
| Personnel:<br>Artistic                                           | \$                                            | _ \$                                             |  |
| Technical/Production                                             |                                               |                                                  |  |
| Administrative                                                   |                                               |                                                  |  |
| Outside Fees and Services:<br>Artistic                           |                                               |                                                  |  |
| Other                                                            |                                               |                                                  |  |
| Space Rental:                                                    |                                               |                                                  |  |
| Travel:                                                          |                                               |                                                  |  |
| Marketing:                                                       |                                               |                                                  |  |
| Remaining Operating Expenses:<br>Production Supplies & Materials | <u></u>                                       |                                                  |  |
| Equipment Rental                                                 |                                               | _                                                |  |
| Other                                                            |                                               |                                                  |  |
| Capital Expenditures:<br>Acquisitions                            |                                               |                                                  |  |
| Other                                                            |                                               |                                                  |  |
| TOTAL CASH EXPENSES                                              |                                               | <u></u>                                          |  |

| INCOME                                   | Last Year<br>Operating Income | Present Year<br>Operating Income | Next Year<br>Operating Income |
|------------------------------------------|-------------------------------|----------------------------------|-------------------------------|
| REVENUE<br>Admissions:                   | \$                            | \$                               | \$                            |
| Contracted Services Revenue:             |                               |                                  |                               |
| Other Revenue:                           |                               |                                  |                               |
| SUPPORT<br>Corporate Support:            |                               |                                  |                               |
| Foundation Support:                      |                               | + <u></u>                        |                               |
| Other Private Support:                   |                               |                                  |                               |
| Government Support:<br>Federal           |                               |                                  |                               |
| State/Regional<br>(include this request) |                               |                                  | ·                             |
| Local                                    |                               |                                  |                               |
| Applicant Cash:                          |                               |                                  |                               |
| TOTAL CASH INCOME                        | \$ ·                          | \$                               | \$                            |

APPLICANT INFORMATION—In the case of sponsorship, information should apply ONLY to the project organization. If information is not available, please so indicate and leave this area blank.

NA for project organization

15. a) When was your organization founded? \_\_\_\_\_

b) What are the principal activities and functions of your organization?

| c) | What is the geographic area served by your organization?                                                  |
|----|-----------------------------------------------------------------------------------------------------------|
| d) | How many artists participated in your organization's activities during the previous year?                 |
| e) | How many individuals benefitted (audience, students, etc.) from your activities during the previous year? |
| f) | How many volunteers assisted your organization during the previous year?                                  |

16. IF THIS PROJECT IS SPONSORED, what is the sponsor's role in the proposed project? (e.g., fiscal agent) If the project is not sponsored, leave this section blank. NMAD recommends a written agreement between the sponsor and the project organization stating mutual obligations to this project.

The Vasulkas, Inc. will act as fiscal agent for the NMAD funds and other contributions to the project, will provide support services to the project and will participate directly in development of the work.

#### 17. TOTAL ORGANIZATIONAL FISCAL SUMMARY

All applicants must fill in the following information. If unavailable for the project organization, the sponsoring organization should complete this.

| EXPENSE TOTALS: | Year:      | Last Year<br>Operating Expenses<br>84-85 | Present Year<br>Operating Expenses<br>85-86 | Next Year<br>Operating Expenses<br>86-87 |  |
|-----------------|------------|------------------------------------------|---------------------------------------------|------------------------------------------|--|
|                 | \$ Amount: | 36,662.40                                | 48,608,84                                   | 40,000                                   |  |
| INCOME TOTALS:  |            | Last Year<br>Operating income            | Present Year<br>Operating Income            | Next Year<br>Operating income            |  |
|                 | Year:      | 84-85                                    | 85-86                                       | 86-87                                    |  |
|                 | \$ Amount: | 36,293.21                                | 49,634.87                                   | 40,000                                   |  |

#### 8. OUTLINE OF PROJECT SCHEDULE (Actual start and end dates plus any other date that marks a significant step in the project)

- Fall/Winter 1986-87: collaborators meet for one week in Santa Fe, Agua Fria and Pecos to select performance sites, design production and rehearse
- May 1987: collaborators meet in Santa Fe for one week of rehearsal prior to the premiere performance; present premiere performance and two subsequent performances
- May July 1987: performances in Albuquerque and Taos; videotaping of work completed and post-production started (separate funding for these aspects of the project)

#### 9. PARTIAL FUNDING

| a) | Would you | be interested in | doing this p | project at a lower | grant amount? | ⊠× yes | 🗌 no |
|----|-----------|------------------|--------------|--------------------|---------------|--------|------|
|----|-----------|------------------|--------------|--------------------|---------------|--------|------|

- c) In the case of partial funding, describe in the space below exactly what project changes would occur in activities and in the budget. If activities are reduced in scope, please describe how and say where in the budget costs would be reduced and by how much. If activities will not change because you plan to raise additional income, please indicate this.

funds will be sought from additional sources to complete the project as described

PROJECT INFORMATION

10. How many artists will participate in the project? -

4 collaborators; 3 young artist/assistants

11. In which counties will this project take place? <u>San Miguel, Santa Fe, Bernalillo, Taos</u>

12. Give the total number of people in the general public (audience, participants, students) excluding employees and/or paid performers who will benefit directly from the project and break out the total figure.

performances - 500; Albuquerque, one performance - 250 to 300; Taos, one performance - 100 to 150; potential broadcast audience nationally and internationally for videotape - 100,000+

| <ul><li>Minorities and Special Constituency Information</li><li>Please answer yes or no to the following:</li><li>a) Is the applying organization minority-owned or minority-operated?</li><li>b) Is the applying organization designed to serve a special audience?</li></ul> | ☐ yes<br>□ ves | □ no |      | · |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|------|---|--|
| <ul> <li>If yes, please indicate who it serves</li></ul>                                                                                                                                                                                                                       |                |      | 🗌 no |   |  |

Circle the categories below which describe your predominant characteristics. Use more than one category only if needed. This information, while not required, enables NMAD to report to its funding sources.

#### SET #1-TO BE FILLED OUT BY APPLICANT (Sponsor)

- G General (adult, general characteristics. Note: Not to be used by individuals.)
- N American Indian/Alaska Native
- A Asian/Pacific Islander
- B Black, not Hispanic
- H Hispanic
- W White

- C Child
- Hearing Impaired Visually Impaired Q P

Senior Citizen

Otherwise Impaired

- I Institutionalized (other than correctional)
- J Institutionalized (correctional)
- V Veteran
- F Woman

## SET #2-TO BE FILLED OUT BY PROJECT ORGANIZATION (if application is sponsored)

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D

- G General (adult, general characteristics.
- Note: Not to be used by individuals.)
- N American Indian/Alaska Native
- Asian/Pacific Islander A
- B Black, not Hispanic
- H Hispanic
- W White
- C Child

Y Secondary School Student

Y Secondary School Student

College/University Student

Mentally or Physically Impaired

- College/University Student U
- Senior Citizen s

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- Ε Mentally or Physically Impaired
- D Hearing Impaired
- Q Visually Impaired

- P Otherwise Impaired

Institutionalized (other than correctional) ł

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- J Institutionalized (correctional)
- V Veteran
- 🕑 Woman

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| <ol> <li>Have you filed a copy of this application with your local Community<br/>(See list in Guidelines).</li> </ol>                                                                                                                                               | Arts Agency? YES                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| 12. A. Do you have any other applications <i>currently on file</i> with the New (If the answer is YES, list below, giving project title and amount re                                                                                                               | Mexico Arts Division? <u>NO</u><br>equested. Continue on separate sheet if necessary.)          |
| B. Please indicate the order of priority your organization has establis<br>(See the Guidelines on Multiple Project applications.)                                                                                                                                   | shed for applications currently on file.                                                        |
| C. In addition to applications already on file, do you intend to apply fo                                                                                                                                                                                           | or additional NMAD grant assistance? Please specify.                                            |
| <ul> <li>D. Have you applied in previous years to the NMAD for funding? If so each of the past five years.</li> </ul>                                                                                                                                               |                                                                                                 |
|                                                                                                                                                                                                                                                                     |                                                                                                 |
|                                                                                                                                                                                                                                                                     |                                                                                                 |
| ASSURANCES: If grant is awarded, applicant must give assurances to the istered by and under supervision of the Applicant; (2) funds received will will conform to the NMAB's general guidelines, application instructions authorized by the applicant organization. | be used solely for the described project: (3) Applicant has read and                            |
| / 600       0LD       PECOS       TRAIL       SANTH       PE         Please indicate the name and phone no. of someone who can be       57E iNA       9838/2                                                                                                        | 1600 OLD PELOS TR, SANTA FE<br>readily contacted regarding any questions about this application |
|                                                                                                                                                                                                                                                                     |                                                                                                 |

| Detaining to be the basis of the second to an end to be an end to be an end to be an end to be an end of the second to be an end |                                     |
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| many artists will be involved (employed, trained, etc.) in the Project:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                     |
| essionalAmateur                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                     |
| ETNA PERSON SUPERIOR SUPERIOR SUPERIOR SUPERIOR SEMINAL FORCE IN THE DEVELOPMEN<br>THE ELEGTRONIC ARTS SINCE 1970, BOTH AS CO-FOUNDER OF "THE KITCHEN",<br>MAJOR EXAIDITION CENTER IN NEW YORK CITY, AND AS A CONTINUING EXPLORER<br>THE POSSIBILITIES FOR THE GENERATION AND MANIPULATION OF ELECTRONIC<br>AGE THROUGH A BROAD HANGE OF TECHNOLOGICAL TOOLS AND AESTHETIC CON-<br>RNS. HER TAPES HAVE DEEN EXHIBITED AND BROADCAST EXTENSIVELY IN THE<br>ATES AND EUROPE. SHE WAS A COGGENHEIM FELLOW IN 1976 AND HAS RECEIVED<br>ANTS FROM THE NEW. STATE COUNCIL ON THE ARTS, THE NEA AND THE COM-<br>CENTLY COMPLETED TWO TAPES FOR WROADCAST; A D MIN. SEGMENT FOR KTCA,<br>THE DEVELOPMENT OF AND 120 HOUR ON DIGITAL IMAGING FOR WNET/THIRTEEN.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 2                                   |
| E ATTACHMENT (DISTRIBUTION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <u> </u>                            |
| his project essentially:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <br>                                |
| Continuing Continuing with changes (for your own organization)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | _?                                  |
| e you applied previously to the NMAD for funding for the same or essentially the same Project?YOYear(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                     |
| Ise include a project/program schedule, indicating start date, significant milestones, such as performance dates, finish date, e<br>SEP-DEC 1981 PHASE I: INAGE COLLECTING<br>JAN-APR 1982 PHASE II: INAGE/SOUND PROCESSING<br>MAYYJUN 1982 PHASE III: EDITING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                     |
| GANIZATION INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | -                                   |
| en founded?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                     |
| TO RAISE FUNDS TO FACILITATE RESEARCH INTO TECHNOLOGICA<br>ROCESSES OF SOUND AND IMAGE FORMING; DIRECTED TOWARD THEIR UTILIZATION<br>AND APLICATION ON TEMPORARY ARTS, FOR THE CULTURAL BENEFIT OF THE PUBLE<br>TO CONDUCT RESEARCH INTO CONCEPTS AND DESIGNS OF ELECTRON- IC ART TOOLS<br>AUDIO AND VIDEO SYNTRESIZERS AND THEIR COMPUTER CONTROL. TO SERVE AS RI<br>SOURCE OF ELECTRONIC ARTS PUBLICATION AND GENERAL ART POLICY-SETTING.<br>ESTABLISH, MAINTAIN; SUPPORT; AND ADMINISTER THE STUDY OF; AND RESEARCH<br>NTO ALL THE VARIOUS CODES AND MODES OF MEDIA BY WHICH MEN COMUNICATE<br>AND INTERACT WITH EACH OTHER AND WITH THEIR ENVIRONMENTS; AND TO SERVE<br>AS A CENTER FOR THE DEVELOPMENT; DEMOSTRATION AND DISSEMINATION OF A<br>HUMANISTIC APPROACH TO SYSTEMS OF COMMUNICATIONS.<br>OF APPROACH TO SYSTEMS OF COMMUNICATIONS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | N<br>1C •<br>S •<br>E -<br>T 0<br>H |
| mber of artists involved in past year: Professional: Semi-Prof.: Am                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |
| mber of people served (audience, customers, students, etc.) in past year <u>SEE ATTACHMENT DISTRIBUTI</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |
| mber of volunteer workers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |
| SCRIBE THE ROLE THE SPONSORING ORGANIZATION WILL HAVE FOR THIS PROJECT.<br>WILL PROVIDE ALL FACILITY AND EQUIPMENT IN-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |
| IND DONATIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     |

## FISCAL REPORT

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|                | PROPOSED: | AS SPENT: |
|----------------|-----------|-----------|
|                |           |           |
| PERSONNEL      | 2,000     | 2.000.00  |
| SUPPLIES/MAT.  | 300       | 498.55    |
| EQUIPM. RENTAL | 2,500     | 2•500•00  |
| TRAVEL         | 200       | 6.00      |
| FACILITIES     | 1.000     | 1.000.00  |
|                |           |           |
|                | 6,000     | 6,004.55  |
|                |           |           |
| IN KIND:       | 3.000     | 2,000     |
| NMAD:          | 2,000     | 2.000     |
| EARNED INCOME: | 1 = 000   | 2.000     |
|                |           |           |
|                | 6.000     | 6,000     |

PERSONNEL: ------FEE PAID TO STEINA 08-31 2,000 SUPPLIES/MATERIAL: --------------10-31 498.55 MOTION PICTURE CAMERA SUPPLY/TAPES LOCATION SHOOTING: SHOOTING OCCURRED ON FIVE DAYS IN SEP., OCT. 81 AND JAN. 82 09-02 200 SKY HIGH 09-22 200 SOMERSAULT 09-29 200 REST 10-04 200 LOW RIDE 01-10 200 PHOTOGRAPHIC MEMORY ---1,000 POST-PRODUCTION: -----POST-PRODUCTION OF "REST" AND "PHOTOGRAPHIC MEMORY", WAS DONE IN A 10 DAY PERIOD JAN. 10-20, 1982. AT THE COST OF 1,000 EDITING: ~ ~ - - - - -EDITING WAS MADE IN ONE WEEK, FEB. 15-19, 1982 AT THE COST OF 500 TRAVEL: \_\_\_\_\_ GASOLINE FOR A TRIP TO THE MESAS OF SAN MIGUEL COUNTY FOR THE SEGMENT "LOW RIDE" 10-04 6.00 CASH MATCH: \_\_\_\_\_\_ 550 ELECTRONIC ARTS INTERMIX 100 ITHACA VIDEO FESTIVAL 200 ATHENS FILM/VIDEO FESTIVAL 150 MEDIA STUDY, BUFFALO 200 PORT WASHINGTON LIBRARY 600 MAGAZINE AUDIO-VISUEL, PARIS 200 VIDEO FESTIVAL, SAN FRANCISCO 

2,000

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|            |                                | Date: July 22, 23, 1986         |  |  |
|------------|--------------------------------|---------------------------------|--|--|
| • •        | PANEL RECOMMENDATION SKEET     | Program Area: Interdisciplinary |  |  |
|            |                                | <u>Reguest: \$_5,000</u>        |  |  |
|            | 1986-87                        | Panel.<br>Recommencs: \$3,500   |  |  |
| •          | THE VASULKAS, INC. SPONSORING: |                                 |  |  |
| Applicant. | • Vocal Windows                | Nc. 26- 125                     |  |  |
| Projest T  | itle: "Vocal Windows"          |                                 |  |  |

Reasons for panel recommendation:

The Panel recommends partial funding in the amount of \$3,500 for this project. The Panel noted the caliber and experience of the artists involved in this project to be excellent. In terms of creativity and non-traditional perspectives, the Panel felt that this was one of the best projects it reviewed. The samples were all of top quality.

| Interest regulati | th the Commission's<br>ions, the following p<br>tained from voting of | panelists left     |           | •     |
|-------------------|-----------------------------------------------------------------------|--------------------|-----------|-------|
| Panel Chairman:   | Joseph Weber                                                          | Alinta             | \$ vote   | 3,500 |
| Panelist          | Estevan Arelland                                                      | Falevettallan      | _ \$ vote | -     |
| Panelist          | Elizabeth Harris                                                      |                    | \$ vote   |       |
| Panelist          | Mark Rendleman                                                        | - 4 Minto lignely- | ş vote    | -     |
| Panelist          | Susan Zwinger                                                         | Allen Crimm        | _ \$ vota | 3,500 |
| Panelist          |                                                                       | (                  | _ \$ vote |       |
| Panalist          | · · · ·                                                               |                    | _ \$ vote |       |