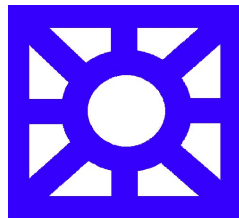


City of North Charleston Cultural Arts Department ArtReach

HOW YOUR SCHOOL CAN PARTICIPATE**

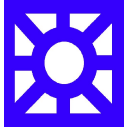
- The School Liaison (appointed by the principal) works with teachers to select a Performing Artist, a Literary Artist, and/or the Visual Artist from the School Resource Book for the 2024/2025 school year.
- The School Liaison completes the appropriate request form to indicate the type of program selected by the school. (Forms are located in this resource book folder and on the website.)
- The principal or assistant principal must approve and sign each request form before it is submitted to the Cultural Arts Department. Our Department will contact the school to confirm the arrangements we make with the artist or performer in accordance with each school request. On each form, please indicate two options in the event that one is not available. If there are any difficulties in procuring the services of the requested artists, we will notify the school as soon as possible.
- **Cancellation Policy:** Once a booking is confirmed and under contract, cancellation or rescheduling of the agreed date by the school for any reason other than an act of God (an inevitable, unpredictable, and unreasonably severe event caused by natural forces without any human interference, and over which an insured party has no control, such as an earthquake, flood, hurricane, lightning, snowstorm) may result in the school's forfeiting participation in the outreach program for that year. Refer to Resource Book, pg. 3, for definition.

*****PLEASE NOTE: No other performer, agent, or artist should contact your school asking for participation or booking as a part of our program. Artists listed in the School Resource Book have been approved prior to their inclusion, and their fees will be paid by the City of North Charleston. Other outside bookings may not be covered under this FREE program without prior approval, but substitutions are possible on a case-by-case basis. Contact our office at the number listed below with any questions.***

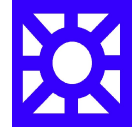


City of North Charleston Cultural Arts Department
P.O. Box 190016
North Charleston, SC 29419-9016
Phone: (854) 999-1457 or (843) 740-5854
Fax: (843) 529-2291
Email: mmartin@northcharleston.org

For a complete listing of programs and services, visit
www.northcharleston.org.



City of North Charleston Cultural Arts Department
ArtReach



PERFORMING ARTIST
PA Request Form

Request form must be completed, signed by the principal and school liaison, and returned to the North Charleston Cultural Arts Department.
EMAIL: mmartin@northcharleston.org

School: _____

Address: _____ City: _____ State: ____ Zip: _____

School Phone: _____ Fax: _____

Principal: _____

School Liaison: _____ Title/Position: _____

Contact #: _____ Email: _____

Performing Artist Requested
(Provide 2 options.)

1st Choice: _____

2nd Choice: _____

Date and Time of Performance or Workshop
(Provide 2 options.)

1st Choice: _____
Date Time

2nd Choice: _____
Date Time

Type of Event: School Assembly Workshop Other: _____

Grade Levels: _____ Expected Attendance: _____

The signatures below indicate the school's acknowledgement of request for participation in these FREE art programs provided by the City of North Charleston. The school will ensure that students, faculty, and the class site are prepared for the arrival of our scheduled artist visit(s) on the date confirmed by the Cultural Arts Department.

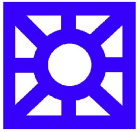
Principal: _____ Date: _____

School Liaison: _____ Date: _____

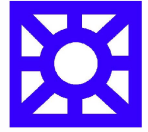
Cultural Arts Signature: _____ Date: _____

For Cultural Arts Office Use: Date Confirmed w/ Artist _____ w/ School _____

Cancellation Policy: Once a booking is confirmed and under contract, cancellation or rescheduling of the agreed date by the school for any reason other than an act of God (refer to ArtReach Roster, pg. 3, for definition) may result in the school's forfeiting participation in the outreach program for that year.



City of North Charleston Cultural Arts Department
SCHOOL OUTREACH PROGRAM
PROGRAM EVALUATION FORM



(Site Contact: Please copy and complete for each program received and return for our records.)

PROGRAM/ARTIST: _____

DATE: _____ TIME: _____

LOCATION: _____

ATTENDANCE:

of Artists: _____ # of Students: _____ # of Educators: _____ # of Other (Parents, etc.): _____

Total # of Attendees: _____

GRADE LEVELS PRESENT: _____

CIRCLE ALL THAT APPLY TO YOUR PROGRAM:

- | | | |
|--|-----|----|
| Was the scheduling of this program completed in a professional manner? | Yes | No |
| Were questions answered in a timely manner and professionally? | Yes | No |
| Do you feel this program was suitable for the audience age group? | Yes | No |
| Did the presentation challenge your audience? | Yes | No |
| Was the artist punctual, prepared, and easy to work with? | Yes | No |

PLEASE RATE THE ARTIST(S) BY CIRCLING THE APPROPRIATE NUMBER FOR EACH CATEGORY:

	EXCELLENT	GOOD	FAIR	POOR
Professionalism	4	3	2	1
Educational value	4	3	2	1
Participation with students (Interactive/Hands-On)	4	3	2	1
Artist's response (Artist was able to answer audience questions in an effective manner.)	4	3	2	1
Audience response (Artist was able to generate audience interest and excitement in learning.)	4	3	2	1

TOTAL SCORE: _____

List any problems encountered: _____

Please list any suggestions for improvement: _____

Additional Comments: _____

Name: _____ Date: _____ Title: _____

Please mail, email, or fax to:
 City of North Charleston Cultural Arts Department
 P.O. Box 190016
 North Charleston, SC 29419-9016
 Phone: (854) 999-1457 or (843) 740-5854 Email: mmartin@northcharleston.org