

# IDEA Opera Grants

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*OPERA America*

## *IDEA Opera Grants*

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*Supported by the Charles and Cerise Jacobs Charitable Foundation*

July 29, 2019: Intent to apply deadline

September 9, 2019: Application deadline

October 2019: Adjudication and notification

For more information, please refer to the grant guidelines [here](#).

Contact Kristal Pacific, grantmaking manager, at [KPacific@operaamerica.org](mailto:KPacific@operaamerica.org) or 646.699.5236 for questions.

## *Applicant Information*

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*In this document, the author of the music will be referred to as the composer and the author of the text will be referred to as the librettist, although applicants may have prior experience as songwriters, poets or playwrights.*

### **Lead applicant name\***

*Character Limit: 150*

### **Lead applicant gender pronoun\***

*Please share the pronoun you use in reference to yourself (e.g., she/her/hers, he/him/his, they/them/their, ze/hir/hir — to learn more about gender pronouns, click [here](#)).*

*Character Limit: 150*

### **Lead applicant team role\***

#### **Choices**

Composer

Librettist

### **Teammate name\***

*Character Limit: 150*

### **Teammate gender pronoun\***

*Please share the pronoun your teammate uses (e.g., she/her/hers, he/him/his, they/them/their, ze/hir/hir — to learn more about gender pronouns, click [here](#)).*

*Character Limit: 150*

## **Teammate role\***

### **Choices**

Composer

Librettist

## *Work Information*

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### **Work title\***

*Character Limit: 250*

### **Work summary\***

*Submit a plot summary of the work associated with the application.*

*Character Limit: 1000*

### **Intellectual property\***

*“Existing work” includes items such as a novel, short story, film or life story. Please select the appropriate choice from the drop-down menu below.*

#### **Choices**

This is my own original work.

This is based on existing work protected by copyright. I have secured rights to this material.

This is based on existing work protected by copyright for which I have not yet secured rights.

## *Project Information*

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### **Project activity type\***

#### **Choices**

Working performance, with or without an audience

Reading

Workshop

Other

### **If "Other," describe here.**

*Character Limit: 500*

### **Project description**

*Describe the specific activities for which funding will be used. You will have the opportunity to describe the activities in greater detail in the full application.*

*Character Limit: 1000*

**Proposed project start date\***

*Funding may not be applied to expenses incurred before December 1, 2019.*

*Character Limit: 10*

**Proposed project end date**

*Grant-funded activities must be completed by November 1, 2020.*

*Character Limit: 10*

## *Identity*

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*To better understand the demographics of OPERA America's applicant pool and evaluate the impact of our grant programs, we ask creators to self-identify racially, ethnically and in regard to gender identity.*

*The intent of this program is to support the promotion and development of new works by artists of color. As such, applicants (composer and librettist) must identify with a racial or cultural heritage that includes African, Latinx, Asian, Arab and/or Native American (ALAANA) to be eligible for this grant program. For more information, click [here](#). The choices below are not exhaustive, or intended to be limiting or prescriptive.*

**Composer identity\***

*Please select all that apply.*

**Choices**

African  
Latinx  
Asian  
Arab  
Native American  
Additional

**Composer identity, continued**

*If you selected "Additional" from the checklist above, please write in alternate or additional words you use to describe your racial or ethnic identity below.*

*Character Limit: 500*

**Composer gender identity\***

*Please select all that apply.*

**Choices**

Female  
Male  
Non-binary  
Transgender  
Intersex

Additional  
I prefer not to respond

### **Composer gender identity, continued**

*If you selected "Additional" from the checklist above, please write in alternate or additional words you use to describe your gender identity below.*

*Character Limit: 500*

### **Librettist identity\***

*Please select all that apply.*

#### **Choices**

African  
Latinx  
Asian  
Arab  
Native American  
Additional

### **Librettist identity, continued**

*If you selected "Additional" from the checklist above, please write in the words you use to describe your racial or ethnic identity below.*

*Character Limit: 500*

### **Librettist gender identity\***

*Please select all that apply.*

#### **Choices**

Female  
Male  
Non-binary  
Transgender  
Intersex  
Additional  
I prefer not to respond

### **Librettist gender identity, continued**

*If you selected "Additional" from the checklist above, please write in the words you use to describe your gender identity below.*

*Character Limit: 500*

*OPERA America does not discriminate on the basis of race, color, religion, sex and gender identity, national origin, political affiliation, sexual orientation, disability, age, or any other status protected under federal, state or local law.*

## Questions

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### Questions

*Do you have questions or concerns about this grant or application process? You may use the space here to share your thoughts, and an OPERA America staff member will assist you.*

*Character Limit: 500*

## Certification

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### Citizenship\*

I certify that my teammate and I fulfill the citizenship requirements for this grant program: each of us has U.S. citizenship, permanent residence status or Deferred Action for Childhood Arrival (DACA) status.

#### Choices

Yes

### Identity\*

I certify that my teammate and I identify with a racial or cultural heritage that includes African, Latinx, Asian, Arab and/or Native American (ALAANA).

#### Choices

Yes