

austin script works®

Seed Funding Application

Member Name: _____
Last *First* *M.I.*

Project Title: _____

Deadline:

- March 1 October 1
 June 1 December 1

Seed Funding Request: \$ Timeframe

Have you received Seed Funding before? When? Yes No

Collaborator(s): _____

- Dramaturg Director Actor
 Visual Artist Dancer Musician Other _____

Brief Project Description:

Brief Project History (Other workshops/readings; where it is in its development):

What is your intention for this project? How will Seed Funding help make it possible?:

Please submit this application, a project budget, and a writing sample to:

Austin Script Works

P.O. Box 9787

Austin, TX 78766

ATTN: Seed Support

Incomplete applications will not be accepted.