



75 Broad Street, Suite 304 | New York, NY 10004
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SURVEY 2017 COMPARISON GROUP

Thank you for participating in the ART Comparison Group. Your responses to this survey are valued and vital to the success of the research study. Email hollisheadrick@gmail.com with any questions.

Instructions:

Please complete this survey based on your activities from January 1 – October 1, 2017. The survey is due no later than October 16th. You can save responses to the questions at any time and return to the survey to complete it later.

ARTIST NAME:

EMAIL:

ARTISTIC VISION & PROCESS

Have you experienced a change in mission and/or artistic mission?

- Yes
- No

If yes, please describe your change in mission and/or artistic vision:

Approximately how many hours do you spend in the studio per month?

Has the average number of hours increased or decreased? If so, briefly describe the reason.

In terms of your creative process, how many artists are currently working with you?

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- Dancers
- Musicians
- Other Collaborators

Please list your performances as a choreographer and/or dancer in your own work or others from January 1 – October 1, 2017 in the following format: (Choreographer, ABC Dance Lab, March 1, 2017 or Dancer, ABC Dance Lab, March 1, 2017)

Please list your planned performance schedule as a choreographer or dancer from October 1, 2017 – October 1, 2018 in the following format: (Choreographer, ABC Dance Lab, January 20, 2018 or Dancer, ABC Dance Lab, January 20, 2018)

EARNED INCOME

Box Office:

Teaching & Commissions:

Other Earned Income:

UNEARNED INCOME

Government & Foundation Grants:

What type of grants have you received?

- Performance
- Space
- Commission
- Capacity Building

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- Awards
- Other

Please list the type of grants and funders that you have applied to (e.g. commission to the XYZ Foundation or DiP Residency at Gibney Dance) from January 1 – October 1, 2017:

Who does your grant writing?

- Me
- My Grant Writer
- A combination of my grant writer and me
- No one, I have never applied for a grant

Individual Donations:

The range of individual gifts received:

Approximate number of individuals in your donor base:

Have you had any fundraising activity/events (e.g. benefit, fundraiser, crowdfunding) from January 1 – October 1, 2017?

Please list your fundraising activities and how much was raised:

Administrative Structure

Do you have administrative support?

- Yes
- No
- Sometimes

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Number of part-time consultants or employees:

Average # of hours consultants or employees work per month:

Are you currently on a booking roster? If yes, please name the roster you are part of.

What are the most pressing administrative challenges?

Have you brought in any new board members?

- Yes
- No

How many new members?

FUTURE GOALS

What are your artistic goals for the next year – October 1,2017–October 1,2018?

What are your administrative goals for the next year – October 1,2017–October 1,2018?

Additional Comments