



**CREATIVE MODEL FORM**

Please answer as many questions as possible. Provide enough detail so your project can be used by others who may be inexperienced in developing projects of this type.

Send your completed form by email to: [artsandaging@mncaan.net](mailto:artsandaging@mncaan.net) (or see mailing address below).  
**Thank you for sharing your success story.**

**Project / Program Title:**

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**Contact Information:** (\*Required)

•Your Name and Organization:

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Mailing Address:

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City:  State  Zip:

Daytime Telephone (Area Code + Number):

•Email Address:

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**Project / Program Details:**

Goal or objective of the project / program:

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Group intended for (e.g., seniors living independently, dementia patients, multigenerational):

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Outcome / benefits:

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Check which category best fits your project / program:

**Dance:**

- Ballet
- Contemporary / Modern
- Ethnic / Jazz
- Traditional / Folk
- Tap
- Wheelchair
- Other (Describe)

**Music:**

- Band
- Chamber
- Coral
- New Age
- Jazz
- Country / Folk
- Ethnic / Traditional
- Opera
- Pop
- R&B
- Rap / Hip-Hop

- Rock
- Religious
- Musical Theater
- Classical
- Other (Describe)

**Theater:**

- Mime
- Puppetry
- Storytelling
- Improvisation
- Musical Theater
- Clown
- Ethnic
- Other (Describe)

**Visual Arts:**

- Ceramics
- Digital)
- Collage
- Drawing

- Jewelry
- Mosaic
- Painting
- Photography
- Printmaking
- Sculpture
- Weaving / Fiber
- Woodcarving
- Mixed Media
- Media Arts
- Other (Describe)

**Literary Arts:**

- Poetry
- Fiction
- Nonfiction
- Other

Length of activity and number of sessions:

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Preparation time required:

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Materials, equipment, or any special location needed:

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Step-by-step instructions (provide as much detail as possible):

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Provide photos of completed project /program, if available:

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Other helpful information (variations, hints):

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**Project / Program Development and Details: (Optional. Your input will help new projects.)**

1. Who started the project / program and what were the initial steps you took?
2. Is the project / program ongoing? How often do you conduct the project / program?
3. Is the project / program presented for a limited time period? How many times?
4. Did you need funding? If so, what funding did you have and how did you get the funding?
5. What type of teacher, mentor, facilitator or director did project/program have? How did you decide who that person would be?
6. How do you find or decide on participants? How many participants did project/program have?
7. Who did you collaborate or coordinate with?
8. Where and when was it held or what space did you use for preparation and presentation?
9. How did you promote it? How are participants recruited?
10. What changes did you make (goals, objectives, content, location, recruitment, or other) over time?

**Send your completed form by email, with attachments, to:**

Pat Samples  
[artsandaging@mncaan.net](mailto:artsandaging@mncaan.net)

**Or send by postal mail to:**

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Brooklyn Center, MN 55429