

**Hawai'i State Foundation on Culture and the Arts  
'Āina-Based APP Museum Art Education program for Capitol Modern, HiSAM  
Cover Form**

*(Fields allow for scrolling text. If additional space is required, please attach a clearly labeled supplemental sheet.)*

Legal Name of Entity submitting the proposal:

Mailing Address (include suite no., city, state, zip):

Billing Address, if different from mailing address (include suite no., city, state, zip):

Website address:

DUNS #:

EIN #:

GET #:

Contact Person (full name and title):

Telephone:

Email:

Director/CEO (full name and title):

\_\_\_\_\_  
Signature (e-signature ok)

\_\_\_\_\_  
Date