

Artist Emergency Fund

ArtsMemphis

COVID-19 Data Collection

ArtsMemphis is collecting and analyzing applicant data and information submitted through this emergency funding opportunity. By submitting an application, you grant ArtsMemphis permission to use the information you provide anonymously and in aggregate to examine the impact of COVID-19 on our community and to inform future grant programs.

If you are awarded a grant, the following information will be collected and reported anonymously and in aggregate by the maker of this grant application software, Foundant, as part of a national effort to quantify support provided in response to COVID-19:

- Grantee Address
- Grantee City
- Grantee State
- Grantee Postal Code
- Grantee Country
- Grant Amount

Artist Emergency Fund Data Collection Acknowledgement*

Choices

I have read and understand the above statement regarding grantee data collection.

Preliminary Questions

Project Name*

For Project Name please enter it as follows:

Your Name_ArtistEmergencyFund

Example: Jane_Smith_ArtistEmergencyFund

Character Limit: 100

How did you hear about the Artist Emergency Fund?*

Choices

ArtsMemphis Website
ArtsMemphis E-mail
ArtsMemphis Social Media

Other organization Website / E-mail / Social Media
Word of Mouth
Other

If you chose "other organization" or "other" for the above question, please explain.

Character Limit: 200

Narrative Questions

Request Amount*

You may request \$500.00 maximum.

Character Limit: 20

What is your artistic practice discipline?*

Please select one option only.

Choices

Music
Theatre
Film / Media Arts
Dance
Literary Arts
Visual Art
Other

Artistic Discipline - Other

If you chose "other" for the above question, please briefly describe your artistic practice discipline.

Character Limit: 250

Tell us about you and your work. What motivates you as an artist or performer?*

300 words maximum

Character Limit: 2000

Resume, CV, or Statement about Artistic Career*

Please upload a copy of your current resume or CV, or provide a brief statement about your artistic career (300 words maximum).

Attachments must be provided in MS Word format or as a PDF file.

Character Limit: 2000 | File Size Limit: 5 MB

Website and Social Media

Please provide your website address, if you have one, and your social media handles, if available.

Character Limit: 2000

Description of Need*

If you have a gig, job, commission or opportunity that was cancelled due to Coronavirus/COVID-19 precautionary measures, please tell us when the job was scheduled for, and when it was cancelled.

Character Limit: 5000

Income Loss*

How much income did you lose as a result of the cancellation noted above?

Character Limit: 20

Need Documentation*

Please upload written confirmation of your cancelled gig, contract or employment, and proof of income loss, such as an email cancellation. Photographs or screenshots of such documentation are acceptable but must be clearly legible.

If you have more than three files documenting your income loss, please attach your top three that can clearly demonstrate your income loss to equal or exceed your grant request amount.

If you did not have a set contract with a specified payment amount for your cancelled gig or event, please provide evidence of income loss, such as past income history or average sales documentation.

File Size Limit: 5 MB

Need Documentation - Additional File

If you need to upload an additional file, please do so here.

File Size Limit: 5 MB

Need Documentation - Additional File

If you need to upload an additional file, please do so here.

File Size Limit: 5 MB

Demographic Information

Please tell us about yourself, so that we gain an understanding of the diversity of the artists applying for this funding opportunity.

What is your age?*

Choices

- 18-24 years
- 25-44 years
- 45-64 years
- 65 years and over
- Prefer not to say

How do you identify your ethnicity?*

Choose all that apply.

Choices

- Native American, American Indian, or Alaska Native
 - Asian or Asian American
 - Black or African American
 - Hispanic, or Latina, Latino, Latinx, or Spanish Origin
 - Native Hawaiian or Other Pacific Islander
 - Middle Eastern
 - White
 - Prefer not to say
- If you don't see yourself in the list provided, please self-describe below.

Ethnicity Self Description

If you indicated above that you prefer to self describe your ethnicity, please do so here.

Character Limit: 250

How do you identify your gender?*

Choices

- Female
- Male
- Non-binary / genderqueer / third gender
- Prefer not to say
- Prefer to self-describe

Gender Self Description

If you indicated above that you prefer to self describe your gender, please do so here.

Character Limit: 250

Are you part of a disability community?

Choices

- Yes
- No

Acknowledgements

I acknowledge and verify the following:*

Note: Please select all for your application to be complete.

Choices

I understand that this application is subject to approval and available funding.

I hereby state that all elements of my application are true.

I verify that I am at least 18 years of age.

I understand that I am NOT required to repay funds.

If awarded funds, I acknowledge that I am not eligible to reapply at this time.

If you are awarded a grant, you will be required to provide the following information before payment may be issued:

- Proof of Shelby County residency. Any of the following may be provided:
 - Driver's License
 - Signed and dated tax form
 - Utility bills with your name on the bill
 - Personal Property tax receipt
 - Lease agreement signed by the applicant and landlord, with the landlord's contact info
- W9 Form
- Direct Deposit form (for most grant recipients)