## max's kansas city project

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" We Al Need a Band-Aid Sometime in Our Lives"

## **GRANT CRITERIA FOR FUNDING**

Max's Emergency Relief & Resource Fund is a one-time grant award of between \$500-\$1000 (\$1,000 when funds are available) to assist artists in all art disciplines who have a steady work history, but who are experiencing a temporary financial set back. MKC assistance is designed to resolve this short term crisis, whatever it may be, and the applicant will again gain employment in the near future. Individuals seeking assistance must be residents of New York State. Exceptions are made in some cases if applicant was affiliated with Max's Kansas City. Applicants whose arrears are so serious that assistance will not allow them relief from their difficulties are not eligible for assistance. Please be specific as to what bill the grant is needed for. Grants of financial assistance do not go to the applicant. Payment goes directly to creditor/third party for housing, medical or legal aid. Please note, although MKC Emergency Grant does cover medical and/or dental bills, it does not cover psychotherapy costs unless the psychotherapist is an MD. Applications must be sent by snail mail. We do not accept email applications. Incomplete grant applications will not be considered.

To be included with application:

- **1)** A letter written by the applicant explaining specifically why assistance is needed and why
- the applicant cannot solve this problem without aid from MKC
- 2) 5-10 work samples. Copies of artworks if applicant is a visual artist, published clippings if
- applicant is a writer, a CD/DVD if applicant is a composer or performer
- 3) Copies of awards, reviews, etc. will be strongly considered
- 4) A list of 3 references in your art profession> Include their physical addresses and telephone #s, of individuals MKC can contact as character references on your behalf
- 5) 1 RECENT letter of referral from a colleague or patron in your field who has known you for
- at least three years and who knows your work intimately
- 6) The following financial information must be submitted and labeled as such clearly in the top
- right corner of each page. Do not send originals. Send copies only:
- 1 current bank statement including balance
- 1 current rent or mortgage statement from landlord or bank
- 1 most recent utility bill
- 1 most recent phone bill
- 1 copy of any current loan statements
- 1 copy of most recent credit or debit card statement

The following income verification is required. Attach all that apply:

. 3 recent copies of invoices to arts clients

**1 NYSDOL unemployment award letter if applicable** 

1 most recent pay stub: indicate clearly on pay stub if this is a "day job" that helps

further your work or an arts job in your field

1 most recent copy of social security, worker's compensation, pensions, tax dividends,

rental income, lottery winnings, stocks, bonds, military benefits, child support, or any

other benefits.

Given your grant application meets our criteria for funding:

7) Visual artists may be asked to donate one sellable, signed piece for possible fundraising use

8) Non visual art disciplines, if selected, will need to provide a paragraph of intent explaining

how their expertise can support the MKC mission

9) Grant recipients may be asked to provide a written testimonial for promotional use

**MKC APPLICATION** Name\_\_\_\_\_ Address Home telephone Work phone Email/URL Date of birth Social Security # Marital status List any other individuals living in your household beside yourself, and your relationship to them Do they contribute to the household expenses? If so how much? \_ \_\_\_\_\_ Please estimate for us your combined gross household income from all sources so far for this month Estimate for us your current personal & professional living expenses monthly Have you received any funding in the last 2 years? Yes No If yes, from which organizations and how much? Please name any other grants have you applied for in the past 3 years Briefly tell us how you have recently given back to the community or helped others in need

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I affirm that the information provided in this application is true and accurate to the best of my knowledge. Your signature indicates that you authorize us to verify any and all information. False or misleading statements of a material fact may subject the applicant to prosecution under New York Law. The IRS has the right to ask us at any time for the applications from our recipients.

Signature:	Date:
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