Criteria for Funding & Application:

Max’s Emergency Relief & Resource Fund is a one-time grant of between $500.00-$1000 to assist self-employed artists who have a steady work history, but who are experiencing a temporary financial set back. MKCP 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. Please note, although MKCP Emergency Grant does cover medical bills, it does not cover psychotherapy costs unless the psychotherapist is an MD. MKCP only covers housing, medical and legal aid. The application and support materials must be sent by snail mail!

Incomplete grant applications will not be considered

To be included with application: This is your check list.

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 names with physical addresses and telephone #s, (NO emails) of individuals MKCP can contact as character references on your behalf
5) One recent letter of referral from a colleague or patron in your field who has known you for three years and who knows your work intimately. The letter must be made out to the Max’s Kansas City Project supporting your need and must be in addition to your three references that we call on your behalf.
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 account number, and balance
- 1 current rent or mortgage statement from landlord or bank
- 1 recent utility bill
- 1 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
  - 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

If you are selected as an awardee:

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 might be asked to provide a written testimonial for promotional use

MKCP 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
_____________________________________________________________________________________

Educational Experience_________________________________________________________________

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.