

# COVID-19 Community Resilience Grants Form

COVID-19 Emergency Relief Grants - Community Resilience

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1 Who is Applying?

2 Organization Information

3 Emergency Funding Information

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Welcome! This is the form for applying to Illinois Humanities to request emergency relief due to COVID-19 in the form of project support.

IF YOU LEAVE THIS PAGE WITHOUT SUBMITTING, ANY INFORMATION ENTERED WILL BE LOST. Therefore, we strongly recommend that you do your writing in a word processing program (e.g., Microsoft Word) and copy and paste it into the form.

REMINDER: Deadline for the Illinois Humanities COVID-19 Emergency Relief Grants - Community Resilience is **5PM CST on June 15**.

If you have any questions or problems with the application process, please reach out to Mark Hallett at [mark.hallett@ilhumanities.org](mailto:mark.hallett@ilhumanities.org) for assistance or visit [ilhumanities.org/ReliefGrants](http://ilhumanities.org/ReliefGrants).

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How did you learn of this funding opportunity? \*

Has your organization ever applied to Illinois Humanities for funding before? \*

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## ORGANIZATION INFORMATION

**Organization Name: \*****Organization Address: \***

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

United States

Country

**Primary Contact: \***

First

Last

**Primary Contact Email: \*****Primary Contact Phone Number: \*** -  - 

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**Primary Contact Phone Type: \*** Mobile  Home  Work  Other

## DUNS Number Necessary to Receive Awarded Funds

You do not need a Data Universal Numbering System (DUNS) number to apply, however, one is required to receive funding, Please visit [grant.gov](https://grant.gov) to request a free DUNS number, if you do not have one.

**What is your organization's DUNS number? \*****What is your organization's annual operating budget? \***

**What was your organization's 2019 annual budget? \***

**For 2019, was that a typical budget year for your organization? \***

**Describe how it was different. \***

**What is your organization's mission? \***

Maximum of 100 words. *Currently Used: 0 words.*

**Please describe your organization's leading public programs? \***

Maximum of 100 words. *Currently Used: 0 words.*

**Who does your organization serve and how? \***

Maximum of 300 words. *Currently Used: 0 words.*

**If your organization is led by and/or serves underrepresented groups, please provide further detail about how your work supports these communities. Underrepresented groups vary in each community. These groups can include people of color; people who identify as LGBTQ+; people who live in rural areas; people with disabilities; people who identify as immigrants or refugees; and people whose first (or only) language is not English. Keep in mind this is not an exhaustive list. \***

Maximum of 300 words.

**Please upload a completed [W-9 form](#) on behalf of the organization. \***

No file chosen

**Upload your organizational logo.**

No file chosen

**In a single file, upload as many as three photos or images of your location or programs at work**

No file chosen

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## EMERGENCY FUNDING INFORMATION

How have your typical sources of funding been impacted by COVID-19? \*

What percentage of your annual budget is received from government or public sources, including federal, state, and city/county sources. \*

## In what ways has your organization been affected by the economic impacts of the coronavirus?

Explanation of Conditions:

- Lost Revenue: Significant total projected 2020 revenue was lost because of canceled programs between March 1 and June 15, 2020.
- Losing Space: We are about to lose our space because we cannot make our monthly rent, mortgage, or utility payments through June 15, 2020.
- Staff Layoff: We are about to lay off one or more staff members because we cannot make payroll through June 15, 2020.
- Risk of Permanent Closure: We are considering or are planning to permanently close our organization as a result of the financial impacts of COVID-19.
- Other (provide details)

Select all that apply \*

- Lost Revenue
- Losing Space
- Staff Layoff
- Risk of Permanent Closure
- Other
- None of the Above

Explain Other Source: \*

**How would you estimate the total financial impact on your organization of COVID-19? We recognize this is a tentative approximation. Please quantify your losses from the date first affected by the virus to the present (or the most up-to-date calculation of your financial losses so far). \***

**What other sources of financial relief are you seeking at this time? (select all that apply) \***

- SBA Loan
- NEH Grant
- NEA Grant
- Arts for Illinois Relief Fund
- State Funding
- County Funding
- City Funding
- Other Illinois Humanities COVID-19 Relief Grant
- Other Illinois Humanities Community Grant
- Other
- None of the Above

**Explain Other Source: \***

**In what ways has COVID-19 impacted your ability to carry out programs? \***

Maximum of 100 words. *Currently Used: 0 words.*

**Approximately how many audience members would have likely been engaged with your programs, but aren't, as a direct result of COVID-19? \***

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**Please describe your Community Resilience project or program below.**

- What local story or stories would this funding help you highlight?
- Why is this an important story or set of stories for your organization to tell?
- How would you go about gathering stories?

- **What form would the final product or content take?**
- **Are there any partnerships involved in this proposed project? \***

Maximum of 500 words. *Currently Used: 0 words.*

**How would you use the grant funds? \***

Maximum of 250 words. *Currently Used: 0 words.*

**Who do you see as the intended audience of this work? \***

Maximum of 250 words. *Currently Used: 0 words.*

**Have you undertaken a project of this sort before? \***

**Please briefly describe the project and the outcomes. \***

Maximum of 250 words. *Currently Used: 0 words.*

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**Is there any information we have not requested, but which you feel is important for Illinois Humanities in evaluating your application?**