

# **COVID-19 Emergency Grant 2021**

This form is for dramatists (playwrights, composers, lyricists, and librettists) to apply for emergency financial assistance from the Dramatists Guild Foundation due to Covid-19 related circumstances.

Please note: DGF's eligibility restrictions have recently changed. *If you have previously received a DGF Emergency Grant since the start of the COVID-19 pandemic, or hold a minimum of \$15,000 in your combined bank accounts, we kindly ask that you refrain from re-applying at this time.* 

DGF serves all dramatists based in the United States, regardless of their immigration status.

## **Application Title\***

**Eligibility Form:** (applicants must meet at two or more of the following requirements):

- O I am currently enrolled in or have graduated from a degree program in dramatic writing or musical theater (creative or nonfiction writing programs are not eligible).
- **O** I am a member or have participated in one or more writer's associations (e.g. LA Alliance of Playwrights, the Dramatists Guild, the Playwright's Center).
- O My work has been professionally developed, workshopped, or produced.

0	My work has been presented for a paying audience.
0	I have been commissioned or paid to write a play.
0	None of the above.
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### DGF defines a play or musical as:

- A work that is at least 10-minutes in length when performed.
- A solo-performed work that is at least 30-minutes in length when performed and composed primarily of words, and/or words and music (DGF cannot support stand-up comedy at this time).
- A piece composed primarily of words, and/or words and music (this does not include orchestrations, underscoring, choreography based work, etc).
- Script, lyrics, music, libretto for a piece of dramatic writing or musical theater storytelling that is intended for the theater.

Please note, your script or score can be un-produced.

# **Eligibility Status**

If you have selected None of the Above, you unfortunately do not meet the eligibility requirements for a DGF Emergency Grant. Please see The Actors Fund, The Authors League Fund, or PEN America for similar funding opportunities.

# **Application Form**

O No

One of the intentions of the Dramatists Guild Foundation (DGF) is to assist writers in times of extreme personal hardship. The questions below are to assist DGF in evaluating your situation. You may attach additional information which you deem relevant to your application. Please be assured that all information furnished by you will be kept in strict confidence.

*indicates a required field
Preferred Name*:
Legal Name (if different from preferred name):
Pronouns (e.g. she/her, they/them, he/his, etc.)*:
Current Mailing Address*
Street (e.g. 123 Main Street, #1A):
City:
State:
Zip Code:
Email Address*:
Phone Number*:
Age*:
Your Emergency
In this section of the application, please tell us about the emergency you are currently facing. Your responses will help us better understand how we can best support your needs.
I have previously received a DGF Emergency Grant:*
O Yes

Please check all that apply regarding the nature of your emergency.* (It is assumed that all applicants have been impacted by COVID-19	
O Medical	
O Housing	
O Living expenses (groceries, utilities, transportation, etc.)	
O Dependent care	
O Natural Disaster Relief (not COVID-19)	
O Legal	
O Other – Medical	
Are you currently looking for employment outside of the theatre?*	
O Yes	
O No	
Please tell us about the current hardship you are facing.* (limit 350 words)	
Please indicate the amount of financial assistance you are requesting.*	
Please provide a breakdown of how you plan to use this grant.*	
Please include with your completed application form one document verifying your status/request.* You may also email this document to applications@dgf.org.	

(This may include medical bills, termination notices, contracts, utility bills, rent receipts, etc. You may submit formal documents if you have them--if not, other written correspondence such as

emails will suffice.)

### **Career Information**

In this section, please tell us about your career writing for the stage.
Have you written/are you writing for the theatre? Please provide details*:
Please upload any document that confirms your career as a writer for the theater. *

Examples: A stage resume, an original script for the theater, a libretto, a musical score inclusive of lyrics, press clippings, a program from a staged performance or verification of DGA membership.

Please note: We cannot accept scripts written for television or film. Please include the title and your full name on the cover page of your work. You may submit scripts/scores for works that have not been produced. DGF reserves the right to verify your documentation.

If applicable, please include any links to your website or social media:

### **Financial State**

O No

In this section, please answer the questions below to give us an overview of your finance	s. This
will enable us to prioritize applicants by severity of need.	

### Please specify any present sources and amounts of income.\*

(These may include wages, pensions, dividends, interest payments, royalties, etc.)

### What is your current monthly rent or mortgage?

What are your current monthly living expenses? (Please include a breakdown of expenses with amounts)\*

# How do you currently manage your finances? Please check all that apply. O Checking O Savings, Money Market, etc. O Business bank account O Other payment accounts (cash, prepaid cards, Venmo, PayPal, CashApp, etc.) Applications with incomplete financial documentation may take longer to process. If yes, please include with your completed application form the most recent summary and/or any documentation for any of the above accounts or methods you have indicated. For accounts, this should include your name, the last four digits of the account, and the account balance. Transaction history is not required. You may also email these documents to applications@dgf.org. Do you own securities, stocks, bonds, real estate, or other investments?\*

Do you live in a multiple-income household?*
O Yes
O No
O Other
If yes, what was your total household income last month?*
What was your total individual income last month?*
Do you have dependents?*
O Yes
O No
If yes, please list the age of your dependent(s) and your relationship to them.*
Have you received a DGF Emergency Grant(s) prior to March 12, 2020?*
O Yes
O No
If yes, please list the years received. *
Have you received a DGF Emergency Grant(s) since March 12, 2020?*
O Yes

If yes, please list the date(s) and amount(s).  At this time, DGF is accepting return applicants and prioritizing first-time applicants.
If yes, have your financial circumstances changed or stayed the same since your previous grant?
What is your preferred payment method? * Checking your preferred payment method does not guarantee that our Committee will be able to grant your request.
O ACH Transfer (Please note: ACH is a quicker payment method.)
O Check payment
If you have selected ACH Transfer, please include with your completed application form a voided check or bank letter verifying the account where you will receive the award. You may also email this document to <a href="mailto:applications@dgf.org">applications@dgf.org</a> . If you are unbanked, DGF will pay for your check cashing fee.
How did you learn of the Dramatists Guild Foundation? *
O Dramatists Guild of America
O dgf.org O Facebook O Instagram O Other:
Are you a member of the Dramatists Guild of America? *
O Yes
O No
O Previously
May DGF share your application with organizations that offer similar emergency funding?* Your application would be shared in an effort to ensure you receive additional support. Your application will remain confidential within our organizations.
O Yes
O No

I understand that application processing times may vary. DGF appreciates your patience as we work quickly to support the many artists in need at this time.\*

I understand that the decision of whether or not to provide an Emergency Grant, as well as the amount thereof, is at the sole and absolute discretion of DGF, and prior to the disbursement thereof, is subject to change. \*

# **Additional Information (optional)**

DGF is committed to reaching and funding applicants who are representative of different and diverse backgrounds and experiences, including but not limited to diversity of race, ethnicity, sexual orientation, gender, religion, ability, culture, and socioeconomics. In order to help us measure and meet these goals, we are including this demographic survey. Your participation is voluntary. This information will not impact DGF's review of your request.

What is your age?
O Under 20
O 20-29
O 30-39
O 40-49
O 50-59
O 60-69
O70-79
O 80 or older
Are you Lesbian, Gay, Bisexual, and/or Queer?
O Yes
O No
O Prefer not to say
What is your gender identity?
O Woman

O Man
O Non-binary
OAgender
OGender queer
OGender fluid
O Prefer not to say
O Prefer to self-describe:
Do you identify as transgender?
OYes
Ono
OPrefer to self- describe:
O Prefer not to say
Which of the following best describes you? (Please select all that apply).
OAmerican Indian or Alaska Native
O Asian/Asian American
OBlack/African American
OHispanic/Latinx
OMiddle Eastern or North African
ONative Hawaiian or Pacific Islander
ONon-Hispanic White
OUnknown
O Not listed or prefer to self-describe:

Do you identify as a military veteran or service member?
OYes
ONo
OPrefer not to answer

I certify that the above is correct and complete. I understand that any grant may need to be disclosed as part of the Dramatists Guild Foundation's public filing.

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