

# EMERGENCY RELIEF FUND (ERF) FOR ARTISTS - FY26-27

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*East Central Regional Arts Council*

**Grant Number\***

*Character Limit: 100*

## *Application Instructions*

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**Ensure that you have thoroughly read through the guidelines and completed the eligibility checklist before filing out this application. If you have not done so already, please do so now.**

If you have questions or need assistance, reach out to ECRAC's Grant Program Officer at [grantinfo@ecrac.org](mailto:grantinfo@ecrac.org), or 320-336-0200.

- Answer all questions in the spaces provided. All questions marked with an asterisk (\*) are REQUIRED and MUST be answered before submitting.
- When uploading a document, make sure it does not exceed the file size limit and that it is in one of the accepted formats.
- You do not have to finish your work all at once - you may leave and return to it before submitting as many times as you like. There is a save button at the bottom of the application page.
- Do not press SUBMIT unless you are sure your application is complete. Once your application is submitted, NO CHANGES OR CORRECTIONS WILL BE ALLOWED. No duplicate applications will be accepted. **Only one application per artist may be submitted for this grant program.**

**I have read and understand the guidelines and above information.\***

Click here for a link to the Guidelines, if needed.

### **Choices**

Yes

### **Artist Contact Information\***

Check your applicant profile to ensure that all of your contact information is up to date. If a grant is awarded this is the name and address ECRAC will use for grant award checks. If everything is correct, please select "yes".

If you need assistance correcting your contact information, reach out to the Grant Program Officer at [grantinfo@ecrac.org](mailto:grantinfo@ecrac.org), or 320-336-0200 and leave a voicemail.

## Choices

Yes

## *Application and Eligibility*

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### **Project Name\***

Please simply enter your name and "ERF" (for example: Vincent van Gogh ERF).

*Character Limit: 50*

### **Eligibility Verification\***

#### **Applicant must:**

- Applicants must identify as an artist or culture bearer and be active in their creative practice, including current and past ECRAC grantees. You will be required to list your area of artistic practice and provide a recent work sample(s) below.
- Applicants must be at least 18 years old and be a U.S. citizen or have permanent resident status.
- Must be a permanent resident, for at least 6 months in one of the East Central Minnesota Counties of Chisago, Isanti, Kanabec, Mille Lacs and Pine, or the sovereign Mille Lacs Band of Ojibwe lands also known as Region 7E, at the time of submitting the application. Proof of residency will be required.
- Applicants must be applying as an individual. No organizations or LLCs will be eligible for funding.
- Applicants' emergency must have occurred in the past twelve (12) months, and be related to healthcare, housing, equipment, or legal emergencies.
- Returning applicants must not have any outstanding or unacceptable final reports with ECRAC.
- Applicants may not receive more than one Emergency Relief Award from ECRAC, and may not receive Emergency Relief Funding from more than one Regional Arts Council in Minnesota.
- ECRAC Board Members are not eligible to apply for this program during their tenure on the Board.

## Choices

Yes, I am eligible to receive an award based on these guidelines.

### **Proof of Residency\***

As stated above, and on page 5 of the guidelines, you must be a permanent resident of Region 7E, at the time of submitting the application. Provide proof of residency in the space below. You may upload a copy of

- your driver's licenses with your Region 7E address

- a voters registration card
- a current rental/lease agreement showing occupancy beginning 6 months prior to submitting the application
- some other form of residency that has been approved by ECRAC Staff prior to submitting this form.

*File Size Limit: 2 MB*

## County\*

Select the Region 7E county below in which you live.

### Choices

Chisago  
Isanti  
Kanabec  
Mille Lacs  
Pine  
Other

## If you are a member of, and live on lands of the Mille Lacs Band of Ojibwe (MLBO)

Please select the county that best represents your location. We recognize that MLBO lands span multiple counties, and that this form does not currently include a separate option for tribal affiliation. *You are welcome to note your connection to MLBO lands in your application narrative if you wish.*

### Choices

Aitkin  
Anoka  
Chisago  
Crow Wing  
Hennepin  
Isanti  
Kanabec  
Mille Lacs  
Morrison  
Pine  
Ramsey

## What is the nature of the emergency you are facing?\*

Please select one.

### Choices

Housing emergencies  
Healthcare emergencies, including medical debt  
Legal emergencies  
Property loss emergencies, including theft, loss due to natural disasters, etc.  
Emergencies resulting from loss of employment, income, or food benefits  
Transportation emergencies (e.g., urgent car repairs, loss of access to reliable transport)

## Amount Requested\*

### Choices

\$500

## Artist Statement\*

Please briefly describe your artistic practice.

*Character Limit: 500*

## Artistic Discipline\*

Select the code that best describes your primary area of artistic practice. [Click Here](#) for a list of current Discipline codes. Example, enter "01A" for Dance, ballet.

### Choices

- 01
- 01A
- 01B
- 01C
- 02
- 02A
- 02B
- 02C
- 02D
- 02E
- 02F
- 02G
- 02H
- 02I
- 03
- 03A
- 03B
- 04
- 04A
- 04B
- 04C
- 04D
- 04E
- 05
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10C  
10D  
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12A  
12B  
12C  
12D  
13  
14  
15  
98

## Artistic Resume

If you have an artistic resume upload it here.

*File Size Limit: 3 MB*

## Artist Work Samples - This section is REQUIRED\*

Use one, or both, of the spaces below to provide samples of your recent artistic work illustrating your artistic practice.

### Examples

**Visual Artists** - you may provide photos of your visual artwork such as paintings, pottery, mixed media, or photography.

**Musicians, Performance and Installation Artists; Actors, Directors, Dance, Film, Media and Video Arts** - you may include links to your video performances such as YouTube or other social

media, and/or Mp3 files.

**Writers, Playwrights, Screenwriters, Prose Writers, and Poets** - Provide written samples, no more than 5 pages, of your writing or poetry.

### Work Sample #1

Use this upload for visual art samples or to provide a document with links to your website or other location to view your work samples. Only one upload is allowed. Multiple files must be combined before uploading. If you need assistance combining files, please reach out to [grantinfo@ecrac.org](mailto:grantinfo@ecrac.org). A minimum of 1 visual art sample is required; however, do not submit more than 5 sample pages.

*File Size Limit: 25 MB*

### Additional Document Upload

If you have an additional document with work samples to upload, you may use the space provide here.

*File Size Limit: 20 MB*

### Work Sample URL

Use this space to provide a link to your website portfolio, YouTube, Mp3 file, etc. You may also upload a document above with the link as well. If your work is password protected, provide the password in an attached document above.

*Character Limit: 2000*

### Additional Work Sample URL

If you have more than one link you would like to share, you may provide a second link here.

*Character Limit: 2000*

## *Regional Arts Council Data Collection*

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### Data Collection\*

The information in this section is **not** used in the evaluation of your grant request and is simply used for data collection purposes. All information in this section is required unless otherwise noted in the application. This information is reported to our funders, the Minnesota State Legislature and the McKnight Foundation.

The data may be distributed to others in accordance with the Minnesota Data Practices Act. Complete information is necessary to ensure the reliability of our data.

### Choices

I understand

## Gender and Pronouns

Please share your gender (and pronouns, if desired) in the box below. (This information is for internal use only and will not be shared or publicized).

*Character Limit: 100*

## Applicant Characteristics

Please select any of the following that apply to you. (This information is not made public).

### Choices

- I - Disability
- V - Veteran
- Y - Young adult (19-24 years)
- A - Adult (25-64 years)
- S - Older than 65
- 99 - None of the above
- Prefer Not to Answer

## Race/Ethnicity

Please select all categories that by your best estimate represent your racial/ethnic characteristics. (This information is not made public.)

### Choices

- N Native American/Alaskan Native
- A Asian
- P Native Hawaiian/Other Pacific Islander
- B Black/African American
- H Hispanic/Latino
- M Middle Eastern/North African
- W White/not Hispanic
- R Multiracial or Biracial
- 99 when no single group applies
- O Other
- Prefer Not to Answer

## Certification

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### Compliance Certification\*

If awarded the Emergency Relief Funds, these funds will only be used for the recipient's personal, emergency needs in compliance with the Emergency Relief Fund Overview and Application Instructions. They may not be used for organizational purposes or outside the intended purpose of the ERF fund. ECRAC reserves the right to report suspected fraud and pursue the return of funds if circumstances warrant.

### Choices

- I agree

**Certification Statement\***

My typed signature below certifies that I meet all eligibility requirements described in the ECRAC Emergency Relief Fund Guidelines and that all information provided in this application and any attachments are true and correct to the best of my knowledge. I further certify that the proof of residency submitted with this application is accurate and valid documentation of my residency within the ECRAC service area.

If I am awarded an East Central Regional Arts Council (ECRAC) Emergency Relief Fund Gift, I agree to comply with all requirements outlined in the ECRAC Emergency Relief Fund Guidelines. I understand that this certification serves in place of a separate gift agreement, contract, and payment request form. I further understand that any award is contingent upon meeting all eligibility requirements and the availability of funds.

I understand that ECRAC issues Emergency Relief Fund Gifts by check only and does not offer direct deposit or electronic payment options. If awarded, ECRAC will use the mailing address provided when I registered, and I am responsible for ensuring that it is current and valid.

Please enter your full legal name in the space provided below. By typing your name, you are providing your electronic signature and agreeing to the statements above. Your typed name constitutes your legal signature.

*Character Limit: 100*