

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

East Central Regional Arts Council

Grant Number*

Character Limit: 100

Application Instructions

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, 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, or 320-336-0200 and leave a voicemail.

Choices

Yes

Application and Eligibility

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.

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
05A
05B
05D
05F
06
06A
06B
06C
06D
06E
06F
06G
07
07A
07B
07C
07D
07E
07F
07G
07H
07I
08
09
09A
09B

09C
09D
09E
10
10A
10B
10C
10D
11
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. (I.E Photos, Documents, Website, Social Media, Portfolio, etc.).

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. A minimum of 1 visual art sample is required; however, do not submit more than 5 sample pages.

File Size Limit: 20 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

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

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 the eligibility requirements listed in the guidelines and that all the information contained in this application and its attachments is true and correct to the best of my knowledge.

I agree that if selected, I will communicate with the East Central Regional Arts Council to accept my award.

Enter your full name in the space provided for your electronic signature in the box below. Note that typing your name constitutes as your legal signature.

Character Limit: 100