

## GRANT APPLICATION FOR INDIVIDUALS

One of the intentions of the Dramatists Guild Fund is to assist fellow dramatists in times of extreme personal hardship. The Fund does not, and cannot, provide grants-in-aid or long-range career assistance, such as subsidizing the writing or production of a play. The questions below are to assist the Fund 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.

### CONTACT INFORMATION:

Name \_\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Are you a member of the Dramatists Guild?  Yes  No

If not, have you ever been a member?  Yes  No

Are you a member of any other guild or union? Please specify: \_\_\_\_\_

### FINANCIAL STATE:

Your present source of income (royalties, wages, pensions, dividends, interest, etc.)

Please specify with amount: \_\_\_\_\_

If without income, what was your most recent financial source? \_\_\_\_\_

If married, is your spouse employed?  Yes  No

Do you own any of the following:

a. Securities, bonds or real estate? Please specify: \_\_\_\_\_

b. Bank accounts (specify bank, branch, amount): \_\_\_\_\_

c. Are you currently receiving Social Security benefits?  Yes  No Type: \_\_\_\_\_ Amount per Month: \_\_\_\_\_

d. Are you currently receiving unemployment?  Yes  No Amount per Month: \_\_\_\_\_

Do you own your home or do you rent? \_\_\_\_\_

If home owner, what is your monthly mortgage payment? \_\_\_\_\_

If renter, what is your monthly rent payment? \_\_\_\_\_

Please list your dependents (name, age, relationship): \_\_\_\_\_

## **CAREER INFORMATION:**

Have you written, or are you currently writing for the professional theater? Please provide details (attach resume, if possible):

\_\_\_\_\_  
\_\_\_\_\_

Have you sought work outside the theater? Please provide details:

\_\_\_\_\_  
\_\_\_\_\_

## **FURTHER INFORMATION:**

How did you hear of the Dramatists Guild Fund?

\_\_\_\_\_  
\_\_\_\_\_

Please outline the nature of your current situation and your immediate financial needs, with an estimate of how much financial assistance you need. Attach any pertinent information (unpaid medical bill or rent notice, etc.):

\_\_\_\_\_  
\_\_\_\_\_

Prior to this application, have you received assistance from the Dramatists Guild Fund?  Yes  No

Date of past assistance: \_\_\_\_\_

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 Fund's public filing.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail completed application and relevant materials to

Attn: Executive Director  
Dramatists Guild Fund  
356 West 40th St., 2nd Floor  
New York, NY 10018

**Tel: 212.391.8384**

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