



Coronavirus Dance Relief Fund: New York State Edition
Tier II: Dance Making Organizations/Groups
Application Guide
Updated as of April 6 2022

Application Guide Introduction:

- This application guide includes all possible questions that appear in the application. You may not have to answer every question as you are completing your application.
- Dance/NYC is looking for clear, concise answers to application questions. Suggested word counts are provided on some fields as recommendations, however applicants can write as little or as much as they need in order to answer the questions as best they can. Applicants will not be penalized for the length of their submission as long as they answer the questions fully.
- Grammar is not taken into consideration in scoring by the review panel, unless the grammar quality disturbs overall comprehension of the application. Scores are not connected to whether or not an applicant has strong written English skills.
- Dance/NYC discourages applicants from trying to answer in a way that is based on what they think reviewers might want to hear. Please be honest in your responses.

Instructions:

Dance/NYC invites small-budget dance making organizations and groups headquartered in New York State with annual expense budgets between \$10,000 and \$250,000 who are experiencing financial losses due to the spread of COVID-19 to submit proposals for financial relief support. Each organization or group selected as a grantee will receive a one-time relief support grant of \$2,500 to \$5,000 for FY22 expenses. Grant amounts will be calculated according to organizational expense budget size.

Before completing the application form, interested small-budget dance making organizations and groups are asked to first complete a series of questions to determine baseline eligibility for the grant program. If eligible, applicants will be prompted to complete the application. The application consists of seven (7) sections in which organizations/groups will be asked to provide their contact, financial, and demographic information, and also respond to questions related to how the pandemic has impacted their artistic work and income over time. All questions are required unless otherwise indicated.

Dance/NYC estimates applicants may need approximately 3-4 hours to complete their application if they have financial records readily available. Applicants may save draft content by scrolling to the bottom of the application form and clicking “Save Draft,” and may return to finish the form at any time prior to the deadline. Complete applications, including supplementary materials, must be submitted online by May 4, 2022, 6:00 p.m. EST. Incomplete applications, hard copy submissions, and applications received after the May 4 deadline will not be considered

Dance/NYC is committed to accessibility and the inclusion of disabled and immigrant people in its programs. To learn more about available accessibility and multilingual assistance options, please visit [Dance.nyc/COVID-19/Relief-Fund/2022/Get-Help](https://www.dance.nyc/COVID-19/Relief-Fund/2022/Get-Help) or contact us at covid19@dance.nyc.

If you need more information about the Fund, please visit the following links:

- Fund Overview: <https://www.dance.nyc/COVID-19/Relief-Fund/2022/Overview>
- Full Call for Proposals: <https://www.dance.nyc/COVID-19/Relief-Fund/2022/Tier-I>
- Frequently Asked Questions (FAQ): for the most updated version visit [Dance.nyc/COVID-19/Relief-Fund/2022/Get-Help](https://www.dance.nyc/COVID-19/Relief-Fund/2022/Get-Help)
- Get Help (includes webinar information and registration for technical assistance): <https://www.dance.nyc/COVID-19/Relief-Fund/2022/Get-Help>

Eligibility Confirmation:

Please answer the questions below to determine whether you are eligible for this

grant program.

Do you identify as a dance making organization or group with a primary function of the creation and/or performance of dance? (Required)

Includes the following: dancer, dance performer, or choreographer.

- Yes
- No

Are you headquartered in New York State? (Required)

NYC dance making organizations are welcome to apply but priority will be given to organizations based in counties outside of the five boroughs of NYC, including: Albany; Allegany; Broome; Cattaraugus; Cayuga; Chautauqua; Chemung; Chenango; Clinton; Columbia; Cortland; Delaware; Dutchess; Erie; Essex; Franklin; Fulton; Genesee; Greene; Hamilton; Herkimer; Jefferson; Lewis; Livingston; Madison; Monroe; Montgomery; Nassau; Niagara; Oneida; Onondaga; Ontario; Orange; Orleans; Oswego; Otsego; Putnam; Rensselaer; Rockland; St. Lawrence; Saratoga; Schenectady; Schoharie; Schuyler; Seneca; Steuben; Suffolk; Sullivan; Tioga; Tompkins; Ulster; Warren; Washington; Wayne; Westchester; Wyoming; and Yates counties.

- Yes
- No

Is your annual expense budget for FY 2022 (forecasted) between \$10,000 and \$250,000?(Required)

- Yes
- No

Are you able to provide proof of current 501(c)(3) status or fiscal sponsorship status?

- Yes
- No

Section 1: Applicant Information

Please fill out the basic information below.

Name of applicant organization or group (Required)

Legal Name (if applicable)

Organization/Group Street Address (Required)

Provide the street address of your primary residence. Please remember the address of your primary residence must be within New York State. P.O. boxes will not be accepted.

City (Required)

Provide the city for your primary residence.

State (Required)

ZIP code (Required)

Provide the ZIP code associated with your primary residence.

County (Required)

Select the county associated with your primary residence. <https://www.ny.gov/counties>

Albany	Franklin	Oneida
Allegany	Fulton	Onondaga
Bronx	Genesee	Ontario
Broome	Greene	Orange
Cattaraugus	Hamilton	Orleans
Cayuga	Herkimer	Oswego
Chautauqua	Jefferson	Otsego
Chemung	Kings (Brooklyn)	Putnam
Chenango	Lewis	Queens
Clinton	Livingston	Rensselaer
Columbia	Madison	Richmond (Staten Island)
Cortland	Monroe	Rockland
Delaware	Montgomery	Saint Lawrence
Dutchess	Nassau	Saratoga
Erie	New York	Schenectady
Essex	Niagara	

Schoharie	Tioga	Westchester
Schuyler	Tompkins	Wyoming
Seneca	Ulster	Yates
Steuben	Warren	
Suffolk	Washington	
Sullivan	Wayne	

NYS Senate District (Required)

Enter the state district in which your organization or group is headquartered:

<https://www.nysenate.gov/find-my-senator>

Tax Classification (Required)

Indicate your organization’s or group’s current tax classification from the options provided.

To be eligible, applicants must currently operate with 501(c)(3) and/or fiscal sponsorship status (or a combination thereof). For details on how to become fiscally sponsored, please visit Dance.NYC/for-artists/resource-pages/fiscalsponsorship.

- 501(c)(3)
- Fiscally sponsored project
- Both 501(c)(3) and fiscally sponsored

If 501(c)(3) is selected, you will need to provide your federal employer identification number (EIN). (Required)

If a fiscally sponsored project is selected, you will need to provide your fiscal sponsor’s contact information and their employer identification number (EIN). (Required)

If both 501(c)(3) and fiscally sponsored is selected, you must choose how you would like your award to be processed, if selected as a grantee. (Required)

Website Address (Optional)

Section 2 – Contact Information

Provide contact information below.

Name of artistic director/lead artistic staff member (limit: one) (Required)

Artistic director/lead artistic staff member email address (Required)

Name of chief executive officer/lead administrative staff (Required)

If same as lead artistic staff, enter “n/a.”

Chief executive officer/lead administrative staff email (Required)

If same as lead artistic staff, enter “n/a.”

Chief executive officer/lead administrative staff phone number (Required)

If same as lead artistic staff, enter “n/a.”

Name of grant contact (Required)

If same as lead artistic staff, enter “n/a.”

Grant contact email address (Required)

If same as lead artistic staff, enter “n/a.”

Grant contact phone number (Required)

If same as lead artistic staff, enter “n/a.”

What is your preferred communications method with respect to your application and the Coronavirus Dance Relief Fund: New York State Edition? (Required)

Select all that apply.

- Email
- Phone call (voice only)
- Text
- Not listed

[If not listed], please specify (Required):

[If text was selected] Do you give Dance/NYC permission to text you at this number with respect to your application and the Coronavirus Dance Relief Fund: New York State Edition? (Required)

Your mobile provider's standard rates for sending and receiving text (SMS) messages may apply.

- Yes
- No

Accessibility Information (Required)

Use this space to let us know of any accessibility needs you might have during your participation in the Coronavirus Dance Relief Fund: New York State Edition application process and in our communication(s) with you. For example, ASL Interpretation, large print, or additional needs. Please note the information provided in this question is solely for logistical preparation and has no impact on your application, eligibility, or grant status. If you have no specific needs, please enter "N/A."

Section 3 – Grant Disbursement

The following information will allow Dance/NYC to submit award funds via direct deposit. We have selected this payment method to ensure grant awards are available as quickly as possible. If you are unable to receive funds via direct deposit, your payment will be processed via check. Please note that check payments may take additional time to process.

Your information will be stored securely. To learn more about Dance/NYC's Personally Identifiable Information Data Access and Protection Protocol, visit [Dance.NYC/uploads/CRF_ NYS PII Data Access and Protection Policy.pdf](https://www.dance.nyc.gov/uploads/CRF_NYS_PII_Data_Access_and_Protection_Policy.pdf).

For Submittable's security procedures, visit (www.submittable.com/security).

Direct Deposit - Fiscally Sponsored Projects

For fiscally sponsored projects, grant payments MUST be processed via the fiscal sponsor and not to your organization's or group's banking account. Please provide the direct deposit information for your fiscal sponsor below.

Are you able to provide a Bank Account Number and Routing Number for your fiscal sponsor? (Required)

- Yes
- No

[If No is selected] You indicated that you cannot provide banking information of your fiscal sponsor. If selected for an award, Dance/NYC will follow up with the required steps that you and your fiscal sponsor will have to take to get your award processed. Please note that this may delay your payment.

[If Yes is selected] Fiscal Sponsor Business Name (as it appears in bank statements) (Required)

[If Yes is selected] Fiscal Sponsor EIN that corresponds with Bank Account (Required)

[If Yes is selected] Name of Fiscal Sponsor's Banking Institution (Required)

[If Yes is selected] Fiscal Sponsor's Banking Details (Required)

- Fiscal Sponsor's Bank Routing Number
- Fiscal Sponsor's Bank Account Number

Direct Deposit - 501(c)(3) Organization

Are you able to provide a Bank Account Number and Routing Number for your organization? (Required)

- Yes
- No

[If No is selected] You indicated that you cannot provide banking information. If selected for an award, your payment will be processed via check. Please note that check payments may take additional time to process.

**[If Yes is selected] Business Name (as it appears in your bank statements)
(Required)**

[If Yes is selected] SSN/EIN that corresponds with Bank Account (Required)

Enter the Social Security Number or Employer Identification Number used to open the bank account. Use numbers only, no dash or special characters.

[If Yes is selected] Name of Banking Institution (Required)

[If Yes is selected] Banking Details (Required)

- Bank Routing Number
- Bank Account Number

Confirmation of Payment Details (Required)

Please review the payment details you are submitting before moving forward.

For organizations and groups that are solely fiscally sponsored, grant payments **MUST** be processed via the fiscal sponsor. If you are a fiscally sponsored project, please double-check that you have entered your fiscal sponsor's direct deposit information and not yours.

Section 4 – Impact of COVID-19

Provide information about the impacts that COVID-19 has had on your organization or group.

This is the most important part of the application!

Mission (Required)

Enter your organization's or group's mission statement, 2-3 sentences.

Primary Genre (Required)

Provide the primary dance genre with which your organization or group most strongly identifies.

Secondary Genre (Optional)

Provide any secondary dance genre(s) with which your organization or group identifies.

Please help us understand how the volume of your entity's artistic work has changed as a result of COVID-19. (Required)

We understand that, at this time in the pandemic, you may not be dealing with canceled engagements, but rather a reduction in engagements being available or offered at all, resulting in fewer new work opportunities. In line with this, we are interested in understanding the overall changes to your dance making activities, regardless of whether the cause was cancellation, postponement, or otherwise.

Please specify the type of dance making activities that have been impacted since 2019, for example: performances (local/regional), performances (touring, national/international), rehearsals, development of new works, commissions, classes, and/or education/community outreach activities. Please include figures to help illustrate. You can use rounded figures instead of exact numbers if you do not have exact figures readily available. Please also note that these details are not required but if included, they will help us understand the impact of COVID-19 on your entity's artistic work.

Suggested word count: 350-700 words

Describe how this loss of income and/or reduced dance making activity as a result of COVID-19 has impacted your organization or group. (Required)

Suggested word count: 250-500 words

Describe the population your organization serves, including age, geographic area, and any other relevant characteristics, i.e., disability or immigration status. (Required)

Suggested word count: 100-200 words

Describe the issues your organization or group is currently facing as a result of COVID-19—both internally and in meeting the needs of the communities you serve. (Required)

Suggested word count: 250-500 words

How will the requested funding help your organization or group address the COVID-19 issues you described above? (Required)

Suggested word count: 500 words

Section 5 – Financial and Governance Materials

Fiscal year start date (Required)

Ex: 1/1/2022

Fiscal year end date (Required)

Ex: 12/31/2022

Expense budget size for 2022 (Required)

Select the budget range that corresponds to your organization's or group's FY2022 expense budget.

- \$10,000 - \$24,999
- \$25,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 - \$99,999
- \$100,000 - \$149,999
- \$150,000 - \$199,999
- \$200,000 - \$250,000

FY2022 Budget Upload (Required)

Please upload your approved FY2022 budget. Please save the file with your organization/group name at the beginning, following this format: Applicant Organization Name_2022 Budget.

Budget Narrative (Required)

Please use this section to share any budget notes, as necessary. If not applicable, please enter “n/a.”

Please help us understand the extent to which COVID-19 has financially impacted your organization or group. (Required)

You can use rounded figures instead of exact numbers if you do not have exact figures readily available. We recognize that it may be difficult to anticipate your 2022 income and expenses. Please do your best to estimate given the information available to you today.

Each section of this table is required. If left blank, your application will be incomplete and unable to consider for funding. Please note: there are 12 required fields in the chart; you may need to scroll down and right to see all fields.

	Pre-Pandemic January 1, 2019- December 31, 2019	Pandemic January 1, 2020- December 31, 2020 Pandemic January 1, 2020- December 31, 2020	Pandemic January 1, 2021- December 31, 2021	Pandemic January 1, 2022- December 31, 2022 (anticipated)
Total Revenue				
Total Expenses				
Net Result (Revenue less expenses)				

Have you accessed any COVID-19 pandemic relief funding to date? (Required)

Dance/NYC's goals through this program are to address the disproportionate access to relief support for dance making communities outside of the metropolitan New York City area and advance economic justice in the dance field by continuing to fill gaps in the availability of resources where they are most needed.

Priority in grantee selection will be given to organizations and groups that have not received COVID-19 relief funding. We trust that you will respond to this question with integrity and that you will also be mindful of the funding priorities outlined.

Please note that financial support received from friends and/or relatives does not qualify as relief funding.

- Yes
- No

[If Yes is selected] Please specify what COVID-19 pandemic relief funding you have received since 2020 and/or are expecting to receive.

Include the sources, amounts, and dates for each pandemic relief award your organization or group has received. Examples of COVID-19 pandemic relief funds include: Paycheck Protection Program (PPP), Economic Injury Disaster Loan (EIDL), Shuttered Venue Operators Grant (SVOG), etc. If not listed here, please be sure to specify the source.

Did you submit an insurance claim for business interruption or other form(s) of insurance? (Required)

- Yes
- No
- I don't know

[If No is selected] Why didn't you submit an insurance claim?

- Our insurance does not cover pandemic-related losses
- We didn't have the organizational capacity
- Other, not listed (please specify)

[If Yes is selected] Were you awarded any compensation? (Required)

- Yes
- No

[If Yes is selected] What was the amount of the compensation? (Required)

Have you applied for any additional COVID-19 pandemic relief funds? (Required)

- Yes
- No

[If Yes is selected] Please describe the funds and amounts applied for. (Required)

Have you received any additional COVID-19 pandemic relief funds? (Required)

- Yes
- No

[If Yes is selected] Please describe the funds and amounts received. (Required)

Proof of 501(c)(3) (Required)

Upload PDF(s) of your IRS determination letter. Please save the file(s) with your organization name at the beginning, following this format: Applicant Organization Name_IRS Determination Letter.

OR

Proof of fiscal sponsorship (Required)

Upload PDF(s) of your proof of fiscal sponsorship. Document(s) should include coverage dates as contracted with your fiscal sponsor or be dated within one month of the date of your application. Please save the file(s) with your group name at the beginning, following this format: Applicant Organization Name_Proof of Fiscal Sponsorship.

Audited Financial Statements (Required)

Please upload your most recent audited financial statements, ideally for 2019 or 2020. If you do not have an audit, please submit your most recent 990. Please save the file(s) with your organization name at the beginning, following this format: Applicant Organization Name_2020 Audited Financial Statements, etc.

If you are a fiscally sponsored group that does not have an audit, 990, or 990N, you can submit alternative financial records for 2019 or 2020. Alternative financial records may be quarterly finances, balance sheets, profits and losses, your group's income tax return, or other documentation that show your group's financial standing. Please note that if you are uploading an income tax return, it must be for your group and not for an individual. Do not upload bank statements or other financial documents that are not representative of your group's financial health.

Section 6 – Diversity, Justice, Equity, and Inclusion

When the review panel reviews proposals, it will consider the role historically under resourced groups--including African, Latina/o/x, Asian, Arab, and Native American (ALAANA), LGBTQ+, women-identifying and gender nonconforming and/or nonbinary, disabled, and immigrant artists--play within the applicant pool and wider dance field. To help in making the assessment, we ask you to complete the following Equity Matrix. If you need additional guidance, please contact us at covid19@dance.nyc. For information on Dance/NYC's values and commitments on justice, equity, and inclusion, please visit [Dance.NYC/equity/values](https://www.dance.nyc.gov/equity/values).

Equity Matrix (Required)

Download our [Equity Matrix in this link](#)

You must complete all tables. Once complete, please upload the file. Please save the file with your organization or group name at the beginning, following this format: Applicant Organization Name_Equity Matrix. You may find a sample demographic survey at [www.Dance.NYC/uploads/Sample_Demographic_Survey_2021.pdf](https://www.dance.nyc.gov/uploads/sample_demographic_survey_2021.pdf)

Additional Forms of Diversity (Optional)

Are there additional forms of diversity not included in the equity matrix (e.g., religious, veteran status, generational etc.) that you think are important for your dance making? Does your organization's or group's staff/board reflect this diversity? Please explain.

Suggested word count: 100 words

Section 7 – Final Considerations

How did you find out about this opportunity? (Optional)

Did you learn about this program from a colleague in the field, a community organizer, an arts council, Dance/NYC's website, emails, or social media, or through a different method? Feel free to include as many sources as may be applicable.

How long did this application process take your organization or group to complete? (Optional)

As Dance/NYC continues its learning and questioning of its grantmaking practices, we recognize that despite our intentions otherwise, our application/reporting processes can cause harm. One such manifestation is imbalanced expectations of the time required to complete such processes.

If you are willing, please share how long this application process took you, so we can better understand and improve our processes in the future.

Feedback on Process (Optional)

Please provide any feedback you may have about this application process, including but not limited to ease of learning about the program, receiving support in submitting your application, and completing the application process. Please share which practices you have found to be beneficial and/or recommendations for improvements.

Please indicate if you'd like to be added to Dance/NYC's mailing and/or text (SMS) lists to receive updates on Dance/NYC's programs and activities. (Optional)

Dance/NYC will use the contact information provided in this application to contact you.

- Yes, email list only
- Yes, text list only

- Yes, both email and text lists
- No, do not add me to either email or text lists

Contract and Reporting (Required)

Grantees will not be required to submit a report. This application will include all information necessary to understand the grantee's use of grant funds. Grantees may be invited to submit a post-grant survey to learn about their experience with the application process.

By submitting Dance/NYC's Coronavirus Dance Relief Fund: New York State Edition application, I affirm that the information I provided in this application is true and verifiable to the best of my ability.

Check your application before submitting

Once you click "Submit," your application will not be available for further editing.

Once your application has been submitted, you will have the opportunity to view and print your application for your records.