

AMERIKA SAMOA HUMANITIES COUNCIL

Humanities Emergency Assistance Relief Term (H.E.A.R.T) Grant Application



“O LE TAGATA O ANANAFI MA LE ASŌ, E FAATAMAOAIGĀ LE TAGATA O Ā TAEAO”

“THE INDIVIDUAL OF YESTERDAY AND TODAY WILL ENRICH THE INDIVIDUAL OF TOMORROW”

Thank you for your interest in the ASHC H.E.A.R.T grant program. Please see our guidelines to make sure your organization is **eligible** for this program. We encourage you to please contact our ASHC team if you are still unsure about your eligibility status. Incomplete applications will not be considered.

All applications must be submitted in-office by **Thursday, June 18, 2020.**

ASHC CONTACT INFORMATION

E-mail ashc.office@ashcouncil.org

Call 633-4870 / 4871

Follow ASHC on Facebook, <https://www.facebook.com/ashcouncil.org>

Visit our office at the Lumanai Building, Fagatogo, Room LB-205

Funding for these grants has been provided by the National Endowment for the Humanities (NEH) as part of the Coronavirus Aid, Relief and Economic Security (CARES) Act economic stabilization plan.

Before you submit your application check to make sure that you've **fully completed** the following:

1. ***Section I: Organizational Information***
2. ***Section II: Applicant Information***
3. ***Section III: Humanities Profile Description***
4. ***Section IV: Grant Agreement***

ASHC H.E.A.R.T GRANT

APPLICATION COVER SHEET

SECTION I: ORGANIZATIONAL INFORMATION

NON-PROFIT: Yes ___ No ___ Current or former grantee of ASHC: Yes ___
No ___

501(c)(3) Number: _____
(or attach a copy of 501(c)(3) verification letter)

DUNS Number: _____

SECTION II: APPLICANT INFORMATION

NAME OF ORGANIZATION

MAILING ADDRESS: P. O. BOX, VILLAGE

TELEPHONE

COUNTRY, ZIP CODE

2. Person to contact about this application: _____
Title: _____ Email: _____ Active Phone(s): _____

3. Authorized Representative: _____
Email: _____ Active Phone(s): _____

4. Fiscal Agent: _____
Email: _____ Active Phone(s): _____

Beginning Date: _____ Ending Date: _____

Program Summary:

SECTION III. HUMANITIES PROFILE DESCRIPTION

(you may use a separate document to answer these questions.)

1. State the mission and/or vision of your organization.
2. Organizational Website/Social Media page link(s)
3. Describe the cultural/humanities-based work your organization does for the community.
4. Provide your organization's annual operating budget.
5. Provide a financial report to show loss of income since February 2020.
6. What current program(s) have been impacted by COVID-19?
7. Provide a description of how COVID-19 has impacted these programs.
8. Describe the new program you will implement in place of the impacted program(s).
9. What is your most urgent financial need for impacted program(s)?
10. Any additional information in support of your application.

SECTION IV. GRANT AGREEMENT

Authorizing Official Signature: _____

The applicant organization assumes all responsibilities as grantee. In signing and submitting a grant application, the authorizing official certifies that the applicant organization will ensure that the acceptance paperwork and **all required reports** for the grant are submitted **on time** and fully comply with the requirements provided in the ASHC H.E.A.R.T guidelines.