

VISION GRANT CRITERIA

Funds brainstorming, researching, and professional development for organizations working collaboratively to develop new ideas and strategies for public-facing humanities projects.

Start date: Applicants should submit proposals at least 2 months in advance of the planning start date, i.e. for planning starting during the month of November, applicants should submit a proposal by September 1; for planning starting during the month of December 1, applicants should submit a proposal by October 1, etc.

Amount: \$500.00 to \$1,500.00

Match: Required

Decisions: Applications are accepted on a rolling basis. At the beginning of every month, HNY reviews requests submitted during the previous month. Grantees are notified at the end of the month of HNY's decisions.

Questions? Email us at grants@humanitiesny.org

Next

VISION GRANT APPLICATION

If awarded, the organization that appears below will be considered the Grantee. Note: Applicants cannot edit their organization name. If you would like to change your organization's name, please email grants@humanitiesny.org

Organization

Test Organization

Organization Mission Statement





Grant Roles: Please denote who in your organization will be acting as the following four required roles by either selecting from the dropdown or entering in this person's contact information—their first and last name, title, organization, email address, and phone number

Primary Contact (PC): Receives all email correspondence related to this request.

Authorizing Official (AO): Person who is authorized by your organization to submit this application for funding. If awarded, this individual will receive and sign the Grant Agreement.

Project Director (PD): The person who is primarily responsible for the project's implementation.

Finance Officer (FO): Someone other than the Project Director who receives and administers the Grant funds.

* PC First Name	* PC Last Name	* PC Title	* PC Organization	* PC Phone  ∨ +1	* PC Email
_____	_____	_____	_____	_____	_____
* AO First Name	* AO Last Name	* AO Title	* AO Organization	* AO Phone  ∨ +1	* AO Email
_____	_____	_____	_____	_____	_____
PD First Name	PD Last Name	PD Title	PD Organization	PD Phone  ∨ +1	PD Email
_____	_____	_____	_____	_____	_____
FO First Name	FO Last Name	FO Title	FO Organization	FO Phone  ∨ +1	FO Email
_____	_____	_____	_____	_____	_____

Save and Next

VISION GRANT APPLICATION

Please refrain from using all capital letters as well as naming your organization or the location of the project in the two following fields.

Project Title: Provide the title you will likely use when marketing the project.

Project Abstract: Provide a one sentence summary of the project. If awarded, HNY will use this text as the basis for its press release.

Character Limit : 500

You inserted 0 characters

Project Description: Explain your program and its format. Address why the theme or topic is important right now and why the humanities are central to this exploration.

Character Limit : 10,000

You inserted 0 characters

Project Team: Identify the relevant individuals and organizational partners who will contribute to the project and describe their responsibilities. Indicate who among them have backgrounds in the humanities and how their expertise will benefit this program.

How many of the planning partners have humanities expertise?

Other Comments

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▶ Planning Process
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VISION GRANT APPLICATION

Number of Planning Activities/Events: Enter the number of planning meetings and/or events that will result from this grant.

Planning Activity Dates: Vision Grants must be submitted at least two months before the planning process begins.

Provide the event dates below, be as specific as possible.

Venues: List all venues and/or digital venues where your planning process will take place, including addresses where applicable. If one or more of your venues is not confirmed, please explain.

Estimated Number of Participants: How many people do you expect to participate in the planning process? Be sure to include "virtual" as well as in-person participants

In-Person

Virtual

Save and Next

VISION GRANT APPLICATION

Use the [HNY budget template](#) for your project budget; upload an excel sheet—*not a pdf*—in the Initial Project Budget field below. This should reflect the full cost of your project, nothing beyond the scope and timeline in your Project Summary. Requests can be between \$500 and \$1,500 and can be used for any expense necessary to achieve the described activities with the exception of international travel and alcohol. Example expenses including staff time, honoraria, and marketing can be found in the [HNY sample budget](#).

A minimum 1:1 match is required in this budget, meaning the total amount requested of HNY must be matched by either cash and/or in-kind services provided by the applying organization (or its partners). Put another way, **Vision Grants can fund no more than 50% of a project's expenses**. Cash can be in-hand or anticipated at the time of grant request.

Applicants may include a de minimis indirect cost rate (ICR) of up to 10% of direct expenses of the total grant. In other words, [TOTAL project expenses] = [direct expenses] + [ICR, which is no more than 0.10 x direct expenses]. If your organization has a federally negotiated ICR, you may use that rate provided you upload documentation in the Request Documents section below.

Attach Initial Project Budget



No files

Referring to your uploaded budget, please provide:

Amount Requested: This is the amount of funding you are requesting from HNY.

Total Project Expenses: This figure should reflect the full cost of your project, including the value of any in-kind contributions and the expenses that will be paid for with this grant request, if awarded.

Amount Requested

\$ _____

Total Project Expenses

\$ _____

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VISION GRANT APPLICATION

Please upload the following documents by clicking the paperclip icon below:

- **501c3 Determination Letter:** Upload the 501(c)3 Designation Letter for the Applying Organization. Municipalities and Tribal Governments may provide alternative documentation of their tax-exempt status.
- **Org 990 or Operating Budget:** Upload the Applying Organization's most recent 990. If the Applying Organization only files a 990-N, please attach an operating budget for the current fiscal year instead.
- **Grant Request Documents (optional):** Upload materials to supplement your narrative. This may include material relevant to this project or an example of a past program, activity, or notable press. There is no limit to how many items can be uploaded.

Grant Request Documents



No files

Previously Uploaded Files

File Title	File Description	Created Date
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▶ Certification

VISION GRANT APPLICATION

This certification is required for application submission.

By selecting yes below, you certify the the information in this application is complete and accurate. You certify that the applying organization has not been suspended or debarred, and that it is not delinquent on federal debt.

If granted, you will comply with NEH nondiscrimination statutes and all other NEH requirements. You will provide HNY with the organization's unique entity identifier (currently a UEI), if it is not already on record.

Authorization: Entering the full name of the Project Authorizing Official (identified in Organization Information section) constitutes a digital signature. The signatory must be an officer of the Applying Organization who is authorized to submit this application for funding.

* Do you Authorize this Request?

* Authorizing Official Full Name

* Certification Date

* Authorizing Official Title

Submit Request

Download PDF of Application