

Alabama Humanities Recovery Grants

Alabama Humanities Alliance

Organization Information

Organization Name*

Enter the name of your organization.

Character Limit: 150

DUNS Number*

The federal government requires every federal grant recipient to register with the Data Universal Numbering System (DUNS). The DUNS number must correspond directly to the applicant organization and must match the name listed above. To register with DUNS, [click here](#).

Character Limit: 10

Nonprofit Status*

The federal government limits funding eligibility to U.S. nonprofit organizations with tax-exempt status, accredited public and 501(c)(3) institutions of higher education, state and local governmental agencies, and federally recognized Native American tribal governments. Individuals, foreign, and for-profit entities are not eligible to receive funding.

Choices

- My organization is a U.S. nonprofit organization with tax-exempt status.
- My organization is an accredited public or 501(c)(3) institution of higher education.
- My organization is a state or local governmental agency.
- My organization is a federally recognized Native American tribal government.

Organization City*

Enter the name of the city where your organization is located.

Character Limit: 50

Organization County*

Select the county where your organization is located.

Choices

- Autauga
- Baldwin
- Barbour
- Bibb
- Blount
- Bullock
- Butler
- Calhoun

Chambers
Cherokee
Chilton
Choctaw
Clarke
Clay
Cleburne
Coffee
Colbert
Conecuh
Coosa
Covington
Crenshaw
Cullman
Dale
Dallas
DeKalb
Elmore
Escambia
Etowah
Fayette
Franklin
Geneva
Greene
Hale
Henry
Houston
Jackson
Jefferson
Lamar
Lauderdale
Lawrence
Lee
Limestone
Lowndes
Macon
Madison
Marengo
Marion
Marshall
Mobile
Monroe
Montgomery
Morgan
Perry
Pickens
Pike
Randolph
Russell

St. Clair
Shelby
Sumter
Talladega
Tallapoosa
Tuscaloosa
Walker
Washington
Wilcox
Winston

Congressional District*

Select the congressional district where your organization is located. To view a map of Alabama's congressional districts, [click here](#).

Choices

- 1
- 2
- 3
- 4
- 5
- 6
- 7

Organization Description*

Briefly describe your organization, including the organization's history, core programs, and activities. Please include your organization's mission statement.

Character Limit: 1500

Audience Served*

Describe the audiences your organization serves. If your organization serves and/or is led by members of communities traditionally underserved by humanities organizations, be sure to describe this in your response.

Underserved communities may include Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

Character Limit: 2000

Humanities Connection*

Describe how your organization provides your audiences with access to humanities content and programming. Provide 2-3 specific examples of recent humanities activities that best reflect your organization's cultural mission.

Character Limit: 3000

Humanities Disciplines*

Select the humanities disciplines that are represented by your organization's core programming and activities.

Choices

Anthropology
 Archaeology
 Art History, Theory, or Criticism
 Comparative Religions
 Ethics
 History
 Jurisprudence
 Language and Linguistics
 Literature
 Philosophy
 Other (specify below)

Other

If you selected other above, specify here.

Character Limit: 250

COVID-19 Impact and Grant Request

COVID-19 Impact*

List how your organization has been affected by the economic impact of the COVID-19 pandemic below. Select all that apply.

Explanation of Conditions:

- Lost Revenue: Revenue was lost because of canceled programs and activities or decreased fundraising
- Lost Space: You have lost or are at risk of losing space because you cannot make monthly rent, mortgage, or utility payments
- Staff Layoff: You have or are planning to furlough or lay off one or more staff members
- Temporary Closure: You temporarily closed or remain temporarily closed
- Risk of Permanent Closure: You are considering or are at risk of permanently closing your organization as a result of the financial impacts of the COVID-19 pandemic

Choices

Lost Revenue (Estimate below)
 Lost Space
 Staff Layoff
 Temporary Closure
 Risk of Permanent Closure

Annual Operating Budget*

Enter your organization's annual operating budget.

Character Limit: 20

Estimated Financial Loss*

Estimate the total financial impact on your organization due to the COVID-19 pandemic. Please quantify your losses from the date first affected by the virus to the present.

Character Limit: 20

Other Financial Relief*

List other sources of financial relief that you are applying for or have received, including SBA or PPP loans; grants you have received from other organizations, local or state government funding, etc. Include the source of funding and the amount requested or received.

Character Limit: 500

COVID-19 Impact Narrative*

In addition to the questions above, describe how your organization or programs have been impacted by the COVID-19 pandemic and how your organization has attempted to offset the pandemic's impact.

Character Limit: 3000

AHA Funds Requested*

Organizations may request up to \$20,000, depending on need.

Character Limit: 20

Use of AHA Funds*

Describe how your organization intends to use requested funding, how the funding will impact your ability to provide humanities programming to the public, and how your proposed activities allow your organization to respond or recover from the COVID-19 pandemic.

An itemized budget is not required. You may use lists or bullet points to describe your intended use of funds.

As you think through your request, please review the Alabama Humanities Recovery Grants [guidelines](#) for allowable and ineligible expenses.

Character Limit: 3500

Additional Information (Optional)

Provide any additional information that you feel is important for us to know as we review your application.

Character Limit: 3000

Project Personnel and Signatures

PRIMARY CONTACT

The Primary Contact is responsible for all correspondence related to this request.

Contact Name*

Character Limit: 100

Contact Title*

Character Limit: 100

Contact Email Address*

Character Limit: 254

AGREEMENT

By submitting this application, I agree to use any awarded funds as set forth in this proposal and certify our compliance with the conditions specified below.

1. Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion (45 CFR 1169)

The applicant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

Where the applicant is unable to certify to any of the statements in the certification, such prospective participant shall attach an explanation to this proposal.

2. Certification Regarding Nondiscrimination Statutes

The applicant certifies that it will comply with the following non-discrimination statutes and their implementing regulations:

a) Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), which provides that no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination under any program or activity receiving federal financial assistance. Title VI also extends protection to persons with limited English proficiency.

b) Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), which provides that no person in the United States shall, on the basis of sex, be excluded from participation in, be denied benefits of, or be subject to discrimination under any education program or activity receiving federal financial assistance.

c) The Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.), which provides that no person in the United States shall, on the basis of age, be excluded from participation in, be denied benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance.

d) Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), which provides that no otherwise qualified individual with a disability in the United States shall, solely by reason of their disability, be excluded from participation in, be denied benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance.

e) The Americans with Disabilities Act of 1990 (42 U.S.C. 12101-12213), which prohibits discrimination on the basis of disability in employment, state and local government services, and places of public accommodation and commercial facilities.

3. Certification Regarding Data Collection

Data collection activities performed under this agreement are the responsibility of the applicant, and AHA's nor the National Endowment for the Humanities' support of grant activities does not constitute approval of the survey design, questionnaire content, or data collection procedures. The applicant certifies that it will not represent to respondents that such data are being collected for, or in association with, AHA, NEH, or any other government agency without the specific written approval of the data collection plan.

However, this requirement is not intended to preclude mention of support from AHA or NEH for grant activities in response to an inquiry or acknowledgment of such support in any publication of this data. AHA and the federal government have the right to obtain, reproduce, publish, or otherwise use the data first procured under a grant and to authorize others to receive, reproduce, publish, or otherwise use such data for AHA or federal purposes.

4. Certification Regarding Grant Agreement and Final Report

The applicant certifies that, if a grant is awarded, the applicant is able to comply with all terms and conditions included in AHA's grant agreement and is willing to supply all relevant information requested in the grant final report. Please contact AHA's grants director, Graydon Rust, at grust@alabamahumanities.org for samples of the grant agreement or final report.

Authorized Signature*

By entering your name below, you indicate that you are authorized by your organization to submit this application and that you agree to the terms and certifications listed above.

Character Limit: 150

Application Date*

Character Limit: 10