

Accessibility & Inclusion GRANT APPLICATION FORM

Guidelines

- 1. SC Humanities' Accessibility and Inclusion Grants are intended to support making public humanities programs and collections more accessible to diverse public audiences. Funds can be used for such activities as translation and captioning services, ASL interpreters, materials for the visually impaired, student transportation expenses, and childcare to make programs more accessible to families. This is not an exhaustive list. Grant funds CANNOT be used for construction costs. Please contact T.J. Wallace to discuss whether your request fits the Accessibility and Inclusion Grant, 803–771–2477, tjwallace@schumanities.org.
- Nonprofit organizations or public institutions are eligible to apply for the Accessibility and Inclusion Grant. Applicants must have an EIN and a UEI number. SC Humanities cannot make awards to fiscal sponsors. The applicant organization cannot function as only a fiscal agent but must make substantive contributions to the project.
- 3. Accessibility and Inclusion Grant applications can be submitted on their own or in conjunction with another SC Humanities grant application (Major, Mini, Fast Track Literary Grant).
- 4. The maximum amount that can be requested currently for an Accessibility and Inclusion Grant is \$2,000.
- 5. SC Humanities grants require a 1:1 cost-share. Cost-share can be both cash and in-kind.
- 6. Applications are accepted on a rolling basis. The program for which funds are requested must take place at least 45 days after the application is submitted. Email the application to tjwallace@schumanities.org.
- 7. This is a competitive application process. Submission of an application does not guarantee receipt of funding. Notification of your application's status will be made approximately 2 weeks after the submission date.

Sponsoring	ORGANIZATION NAME					
Organization	ADDRESS		CITY	ZIP		
	TEL		FAX			
	US CONGRESSIONAL DISTRICT STATE SEN DISTRICT STATE REP DISTRICT YOU MAY OBTAIN DISTRICT INFORMATION FROM YOUR COUNTY ELECTION BOARD OR AT www.scstatehouse.gov FEDERAL TAX ID NUMBER (REQUIRED) UEI NUMBER (REQUIRED)					
	WEBSITE					
Project Director	NAME TITLE					
Ū	ADDRESS		CITY	ZIP		
	TEL	FAX	EMAIL			
Fiscal Officer	NAME		TITLE			
	ADDRESS	CITY Z		ZIP		
	TEL	FAX	EMAIL			

About the Program	TITLE					
	DATE		TIME			
	DESCRIPTION					

INTENDED AUDIENCE

HUMANITIES DISCIPLINES INVOLVED

HOW WILL GRANT FUNDS HELP IMPROVE ACCESS TO YOUR PROGRAM?

Program Who are the key people assisting with activities, and what are their qualifications? **Personnel**

Budget Please provide a detailed budget.

The total cost-share (in-kind, cash, or a combination) must at least equal the amount of the outright request. Costs of designing the project, preparing the application, or other activity prior to the grant approval cannot be included in the project budget.

EXPENDITURES	SCH GRANT FUNDS	COST-SHARE		TOTAL
		CASH	IN-KIND	
HONORARIA/SALARY				
TRAVEL/PER DIEM				
SUPPLIES & MATERIALS				
SPACE OR EQUIPMENT RENTAL				
PROMOTION				
OTHER:				
TOTALS				

Project Director

SIGNATURE

DATE

Fiscal Agent

SIGNATURE