

# Staffing the Humanities 2022

---

*Massachusetts Foundation for the Humanities*

## *Program Staffing*

---

### **Non-profit Status**

Choose the description that best matches the organization applying for this grant.

#### **Choices**

My organization is a currently tax-exempt 501(c)(3).

My organization is not a 501(c)(3) but it is fiscally sponsored by a currently tax-exempt 501(c)(3).

My organization is a state or federally recognized tribe.

My organization does not match any of the above (it may not be eligible).

### **Non-profit "Other"**

If your organization did not match any of the descriptions above, please tell us about it.

*Character Limit: 250*

### **Has the organization received a grant from us before?\***

#### **Choices**

Yes

No

## Past Mass Humanities Grant Awarded\*

Enter the most recent grant that was awarded to your organization from Mass Humanities and include the year, grant program and title, for example "Project Grant 2020 - Name of Project."

Eligible organizations must be former Mass Humanities grantees. If you have not received a grant from Mass Humanities before, you are ineligible for this opportunity.

*Character Limit: 250*

## Project Name\*

Please write Staffing the Humanities and the name of your organization. For Example, "Staffing the Humanities - Example Organization"

*Character Limit: 100*

## Amount Requested\*

Enter the request amount. Amount must be between \$7,000 and \$20,000. Use whole dollar amounts only.

*Character Limit: 20*

## Organization Mission and Work\*

Enter your organization's mission statement and provide an overview of the range of things your organization does.

*Character Limit: 4000*

## Other Social Media

Enter any other social media links or handles not in your organization profile.

*Character Limit: 50*

## Organization Type\*

Select the description that best fits your organization.

Eligible organizations include museums, historical societies and community cultural organizations with humanities programs. If you are not one of these types of organizations, you may be ineligible.

## Choices

Historical Society  
Education non-profit  
Community Cultural Organization  
Youth Services Organization  
Community Services Organization  
Mental Health or Medical Organization  
Arts Organization  
Archive  
Community Organization or Center  
Cultural Heritage Organization

- Historical Site/House
- Indigenous Tribal Organization or Community
- Media Organization
- Membership Organization or Association
- Museum – Art
- Museum – History
- Museum – Other
- Public Library
- Other - If other organization type, please explain.

### Organization Type Other

If you select "other" type, please explain.

*Character Limit: 250*

### Staffing Needs\*

Select which staffing needs you are applying for:

#### Choices

- Creating New Humanities Programming
- Expanding Humanities Programming
- Restoring Humanities Programming that was suspended due to COVID-19

### Current Staffing Level

---

### Current Staffing Level\*

How many Full Time Equivalent (FTE) employees does your organization currently have?

To calculate the FTE, take the total number of paid hours worked weekly by your staff and divide it by 40 (40 hours is considered full-time for this application). For example, if your organization has a director who works 40 hours a week and a part-time program manager who works 25 hours a week, your FTE would 1.625.

Eligible organizations must have five or fewer FTE.

*Character Limit: 10*

### Total Full-Time Employees as of December 31, 2021\*

*Character Limit: 10*

### Total Part-Time Employees as of December 31, 2021\*

*Character Limit: 10*

### 2022/23 Estimated Staffing Level

---

Complete the below questions for the level of staff you would estimate having with this grant.

## Projected Full-Time Employees 1/1/2022-12/31/2023\*

*Character Limit: 10*

## Projected Part-Time Employees 1/1/2022-12/31/2023\*

*Character Limit: 10*

## Staffing Needs Statement\*

What are your staffing needs in order to Expand, Create or Restore humanities programming? How was this need determined? How would increased or restored staffing help your organization better meet its mission and goals?

*Character Limit: 4000*

## Humanities Component\*

Select the descriptions(s) that best match the humanities activities in your proposed program(s). Select all that apply,

### Choices

Cultural and/or oral-history storytelling

Historical and/or cultural exhibitions, presentations, discussions,

Historical and/or cultural tours

Programs that educate about culture and traditions

Community conversations about values, identity, and big questions about the world we live in

Education or conversation about books, theater, music, art, media, or history

Education or conversation about community issues and government

Education about democracy, ethics, or philosophy

Writing workshops that focus on humanities topics like history, identity, culture, philosophy, etc.

Other public programs that feature the humanities at its core (describe below)

## Humanities Component Other

*Character Limit: 250*

## Program(s) Description\*

Describe the program that you are planning on developing or growing with this grant. Address the following: 1)What the target audience is and what participants in the program(s) do. 2) How many times in a year your programs are offered. 3) How will humanities subjects or methods be important to the program and/or the participants' experiences. 4) How is the proposed program different from your current or existing programming?

*Character Limit: 5000*

## Program Goals\*

What is the the end-result of the program(s) you are proposing? How will you measure success of meeting these goals?

*Character Limit: 3000*

## Use of Funds\*

How do you plan to use the funds if you are awarded the grant? Please provide details to the staff position and program you are proposing including 1) Amount of staff time for the program. 2) wage rate and/or salary for the staff position. 3) How did you determine the wage rate for this position? 4) What activities will the position undertake?

*Character Limit: 5000*

## What will be the cost(s) for participants in this programming?\*

To be eligible, proposed programs need to:

- Make the humanities accessible to the public beyond 4-year college students
- Be free or low-cost to participants

If the cost is "0" enter "free"

*Character Limit: 250*

## Community Served\*

Is your project or program primarily designed to serve any of the following communities? To primarily serve is to chiefly or mainly serve this community before others. Note: We recognize that many communities identify across these categories or do not fit neatly into them. Please check no more than four categories.

### Choices

Seniors with limited access or mobility

Rural Communities with limited access to humanities institutions and programming

LGBTQIA Communities

Indigenous Communities

Black or African American Communities

Latinx Communities

Asian, Asian American, Pacific Islander, or South East Asian Communities

Immigrants and/or Refugees

Members of Low-Income Communities and Families

Veterans

People who are or have been incarcerated

People without housing

People with disabilities

People living with addiction or mental illness.

Other communities vulnerable to persistent inequality (please note in your answers below)

No, it does not primarily serve any of the communities listed.

## Communities Served - Other

If you selected "Other communities" above, please provide more detail below.

*Character Limit: 250*

## Community Involvement\*

How will your organization involve the community that you serve in the creation, implementation, or oversight of your program?

*Character Limit: 4000*

### **Total Audience/Participants Previous Fiscal Year\***

Estimate the total number of people served by your organization in your previous fiscal year.

*Character Limit: 10*

### **Total Anticipated Audience/Participants\***

Enter the sum total of audience members/participants you think will attend your grant-related event(s) or program(s).

*Character Limit: 10*

### **Total Anticipated Humanities Engagement\***

Estimate the total hours of humanities engagement for the program by multiplying the number of anticipated participants by the estimated number of hours they will engage with the program. For example, a 5-part community discussion series, 1.5 hours per session, with 30 attendees per session would be 225 hours.

*Character Limit: 20*

## *Fiscal Sponsor*

---

Fiscal Sponsor questions below are only required for non-501c3 applicants using fiscal sponsors.

Fiscally sponsored applicants: Ad-hoc groups, and non-profit organizations without 501(c)(3) status must find an eligible 501(c)(3) organization to be their fiscal sponsor. Fiscal sponsors manage the grant funds and are identified in the application. They must also provide a signed fiscal sponsor agreement.

### **Fiscal Sponsor**

Enter the legal name of your fiscal sponsor.

*Character Limit: 250*

### **Fiscal Sponsor Mailing Address**

Enter the mailing address of your fiscal sponsor (Street Address or P.O. Box, City, Zip Code).

Note: if you are awarded a grant and choose to have a check mailed instead of direct deposit, it will be sent to this fiscal sponsor address.

*Character Limit: 500*

### **Fiscal Sponsor Agreement**

Upload your agreement with your fiscal sponsor.

If you need a Fiscal Sponsor, here is a sample Fiscal Sponsor Agreement and here is a list of Fiscal Sponsors in Massachusetts.

Note that finding a fiscal sponsor can take time and you need to have a Fiscal Sponsor Agreement signed by the application deadline. If you are new to Fiscal Sponsorship, here is a brief description and here are some questions to ask potential Fiscal Sponsors.

*File Size Limit: 1 MB*

## *MH Equity Analysis*

---

### **Annual Operating Expenses\***

Enter the annual operating expenses most recently reported on your IRS 990 or in your most recently completed fiscal year. If you file a 990N, enter your cash expenses for fiscal year 2021. If your organization is fiscally sponsored, enter the expense of your program only, not including expenses of your fiscal sponsor's other operations. If your organization is a government or other eligible entity, put the expenses for the department or office applying, if available.

*Character Limit: 20*

### **Operating Expenses Upload\***

Upload the first two pages of your most recently reported IRS 990. If your organization files a 990N or if your organization is fiscally sponsored upload the total expenses for your most recently completed fiscal year. If your organization is a government or other eligible entity, upload the best equivalent document for your department or office.

*File Size Limit: 1 MB*

### **Project/Program Leadership – Historically excluded communities A\***

Does the project or program for which you are seeking funds currently have leadership from people who identify as Black, Indigenous, or as a person of color (including but not limited to, of Latinx, Asian, Pacific Islander, or South Asian descent or origin) in any of the following roles? Select all that apply.

#### **Choices**

Project Director

Program Director

Humanities Advisor

Lead Curator

Lead Designer

Community Engagement

Other leadership role (please describe below)

N/A - We do not have (or do not know if we have) project leads who identify as BIPOC

### **Project/Program Leadership – Historically excluded communities B\***

Does your project or program for which you are seeking funds currently have leadership from people who identify as being of other historically excluded community, including but not

limited to LGBTQIA+ or disabled. An individual included in the previous question may also be included here. Select all that apply.

### Choices

Project Director

Program Director

Humanities Advisor

Lead Curator

Lead Designer

Community Engagement

Other leadership role (please describe below)

N/A - We do not have (or do not know if we have) project who identify this way.

### Other Leadership Role

*Character Limit: 100*

## Required Uploads

---

### Tips for Uploading Documents

- You will be able to see that your document has been successfully uploaded only after you save the application.
- Each field accepts only **one** document. You can replace a document previously uploaded simply by uploading another file (there is no delete button).
- You may need to combine multiple documents prior to uploading. If they are all of the same type, such as Word, you can combine them in Word before uploading. If they are mixed formats, you may need to turn them into PDF files and then combine them into one file before uploading.
- Creating PDF files: If you need one, you can download a recommended free PDF creator.
- Combining PDF files: Instructions can be found here if you need to combine multiple PDF files into one file for uploading.

**Note:** If you do not have these documents in digital form, you may use the Fax-to-File service available in the Tools menu to get your documents in pdf format.

### Budget\*

Download this budget template and upload a completed version.

*File Size Limit: 1 MB*

### Job Description\*

Upload one document with the job description(s) that the organization is proposing to expand or hire.



*File Size Limit: 1 MB*

## Resumes of Personnel

(Optional) Upload one document with the combined resumes of staff that would be increasing their time with the organization or new personnel the organization is planning on hiring. Resumes should include the person's relevant credentials, skills, publications and/or experiences. Each resume should be ONLY two pages long

*File Size Limit: 2 MB*

## *Personnel*

---

### Program Contact First and Last Name\*

The Program Contact organizes the program(s) and completes online reporting.

*Character Limit: 100*

### Program Contact Position/Title

*Character Limit: 100*

### Program Contact Address\*

Provide a mailing address that includes the city, state, and zip code.

*Character Limit: 250*

### Program Contact's Email\*

*Character Limit: 254*

### Program Contact's Daytime Phone Number(s)\*

*Character Limit: 100*

The Authorizing Official is the person authorized to make legal contracts for the organization.

### Authorizing Official's First and Last Name\*

Enter the first and last name of the authorizing official for the applicant organization, or fiscal sponsor if the applicant is fiscally sponsored.

*Character Limit: 100*

### Authorizing Official's Position/Title\*

Enter the first and last name of the authorizing official for the applicant organization, or fiscal sponsor if the applicant is fiscally sponsored.

*Character Limit: 125*

### Authorizing Official's Email Address\*

*Character Limit: 254*

## *Pre-Award Agreement*

---

### **Pre-Award Agreement\***

By selecting "I agree" below, I certify the following:

1. The statements contained herein are true, complete, and accurate to the best of my knowledge, and I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.
2. The applicant organization assumes all responsibilities as grantee and may not operate simply as a fiscal agent (though the applicant may itself have a fiscal sponsor).
3. Any funds granted as a result of this application will be used in accordance with the plans and budget described in this request; any significant changes in activities, personnel, or budget will require prior approval by Mass Humanities.
4. The applicant organization's Authorizing Official, who is empowered to accept the terms of an award agreement if a grant is made, certifies that the applicant organization agrees to submit a final grant report, including a final budget and information about the impact of these funds.

### **Choices**

Yes, I agree.