SWEET RELIEF COVID-19 FUND APPLICATION

Eligibility Requirements:

- At least 3 years where more than 50% of your income came from employment in the music industry or as a musician, and currently negatively impacted by COVID-19.

Required Documentation: Please include the following items required with the completed application: (Applications will not be processed without this information)

- Proof of Music Industry Employment (publications, link to ASCAP or BMI repertoire, note from employer(s))
- A biography, resume, or discography
- Documentation of loss of income (copy of your contract, flyers or links to event sites listing your involvement in the canceled event, letter/email from employer identifying cancellation, etc.)

Application (*required):		
*Legal Name: First	Last	
Professional Name (if different)	Support	
*Mailing Address		
	Apt #	
City	State	
ZipCountry	- AAT ICICIANI	
Home Address (if different)		
	Apt #_	
City	State	
ZipCountry		
*Home Phone	Mobile Phone	Work Phone
*Email Address		
*Preferred Way To Contact (circ	e all that apply):	
Phone Email	Ground Mail	
*Permission to leave voicemails	that include personal informat	tion: Yes / No
*Social Security Number	*Date of Bi	rth(MM-DD-YYYY)

Marital Status:_Single_Married_Domestic Partnership_Separated_Divorced_Widowed			
Average Monthly Household Income:			
Are you currently receiving unemployment? Yes / No If so, please provide weekly amount:			
PROFESSIONAL CAREER HISTORY SECTION (*required)			
*Please state how many years you have worked in the music industry			
*What do you do? (e.g. bassist, artist manager, songwriter etc.)			
*What is your primary genre? (if applicable)			
FOR MUSICIANS			
What is the URL for your website?			
Where can we find your music online? (Spotify, Apple Music, Soundcloud, etc.)			
What are your social media channels?			
Facebook https://www.facebook.com/			
Instagram https: www.instagram.com/			
Twitter https: www.twitter.com/			
*Briefly describe how you were affected by Covid-19			
FUND			
OPTIONAL SECTION (there is no consequence for not including this information. This information is examined by Sweet Relief to understand the diversity of applicants)			
Ethnicity:			
White_Hispanic or Latino_Black or African American_Native American or American IndianAsian / Pacific IslanderOther (please specify)			
Gender: Female Male Other (please specify)			
I hereby certify that I have answered the foregoing questions to the best of my ability. The facts herein stated are true and I understand that any misrepresentation of this information may disqualify me for any assistance from Sweet Relief Musicians Fund.			
SIGNATURE OF APPLICANT:DATE:			