

**A Room of Her Own Foundation
Literary Gift of Freedom Award Application Template
General Instructions**

A Room of Her Own Foundation (AROHO) is dedicated to helping women artists achieve the privacy and financial support necessary to pursue their art. As Virginia Woolf recognized in the 1920s, “a woman must have money and a room of her own if she is to write.”

While Woolf spoke of writers, AROHO applies her words to women of various disciplines. The ___ Literary Gift of Freedom Award will be given to an American woman writer who is a U.S. citizen or legal resident and will be living in the U.S. during the grant period. Because the award is quite substantial, the application process is extensive. Applications must be postmarked on or before _____. **The acceptable genres for this grant are creative nonfiction, fiction, playwrighting, & poetry.**

One winner in any genre will be chosen for the \$50,000 grant, and a finalist from each remaining genre will be selected. The winner and finalists will be honored guests at an AROHO-sponsored Gift of Freedom event.

To apply for the ___ Literary Gift of Freedom Award, complete the Application with all its parts (please follow the Checklist) and mail the application package to A Room Of Her Own Foundation, P.O. Box 778, Placitas, NM 87043. A Room of Her Own Foundation will accept more than one application from any applicant. Each application must be mailed in a separate mailing envelope. Packages *must be postmarked* on or before _____—no exceptions. *Courier service (UPS, FedEx) packages will not be accepted—use the U.S. Postal Service. Do not send return receipt requested. We will return your self-addressed, stamped postcard upon receipt of your package.*

The ___ Literary Gift of Freedom Award recipient will be announced on our website, www.aroomofherownfoundation.org, on _____.

A Room of Her Own Foundation Literary Gift of Freedom Award Application Template

Application Package Tips

Read the entire A Room of Her Own Foundation website at www.aroomofherownfoundation.org. Much helpful information is contained on the website. Start reading with Gift of Freedom: Guidelines & Award Criteria.

Follow the checklist to make sure your application package is complete and in correct order for submission. *Before you mail your application*, we recommend that you consult our website, www.aroomofherownfoundation.org, one last time for any changes or updates.

Do not forget to send the \$35 application fee (\$5 is tax deductible) in the form of a check or money order payable to "A Room of Her Own." Please write "GOF Application Fee" and your application genre in the memo line.

Be sure to mail application package on or before the "postmarked by" date. Packages should be sent by regular, first class mail to: A Room of Her Own Foundation, P.O. Box 778, Placitas, NM 87043. No UPS or FedEx or other courier delivery will be accepted.

Print each item separately—do not allow one item to run into the next.

Essay and writing sample pages should all be 12-point Times New Roman (or similar) type, double-spaced with 1" margins.

Submission pages should be numbered separately for each item of application (e.g., A page A-1, B page B-1 through B-5).

Use only black ink on standard weight white paper—no colored ink, no colored or heavy paper.

Send only 8 ½" x 11" sheets—nothing larger or smaller.

Application materials are not returnable.

Extraneous or excessive materials will be discarded. References and/or nominations will not be reviewed. Any submission exceeding specified length will not be read past the authorized page limit.

No stapled or bound materials—no ring binders, no bound published works, no videos, no cassettes, no page protectors. Fancy submission packages will only be seen by office staff. Panelists get photocopies. Do not send materials that do not photocopy well.

Make sure your name *is not* on the checklist items grouped in the "must not contain identifying information" group. Anonymous photocopies of the application packages are reviewed by selection panel. Names are allowed only on the AROHO forms requiring them and on IRS forms.

Don't send your résumé. Submit your information in the format requested.

Please plan ahead. If you do not have copies of your older tax returns, you can request them from the IRS. *Do not have the IRS send them to us*. All forms should be sent to you and included in the application package you send to AROHO. Plan ahead when requesting returns from the IRS. Do not send an application package with a note saying the IRS did not get your returns to you in time to include them in the package. Incomplete applications will be disqualified.

For income tax returns: send only personal federal income tax returns—income page and signature page only. ***Each return must be signed even if there is no "signature line"***. Application package must contain your three most recent returns for consecutive years. Do not send state income tax returns. No W-2s, no corporate or business forms.

No attachments–basic form only.

Don't make tax returns anonymous. We need to see that they belong to the applicant. Please black out any Social Security Numbers on the tax returns.

If you were not required to file a federal income tax return for any of the past three consecutive years, you must write a detailed explanation to AROHO to be included in your application package in place of your tax returns. Without either returns or explanation labeled Tax Return Explanation, your application is incomplete and automatically disqualified.

Answer every part of application, especially community service. If an item in the application is not applicable, mark it as such. Incomplete applications will be disqualified.

All AROHO forms with signature lines must be signed.

Everything to complete the application (follow the checklist) must be included in one mailing package.

Since the grant application cycle is long, additions to the Lists (Education, Prizes, Publications, Employment History, Community Service) will be allowed up until the application deadline of _____. These additions must be *mailed* to GOF Additional Information, A Room of Her Own Foundation, PO Box 778, Placitas, NM 87043 and must reference applicant and date the original application package was mailed. Do not e-mail additions. Any other desired changes to the application necessitate a new application package. An applicant may apply as many times as desired providing each application is complete and separately mailed.

Incomplete and/or late applications will be disqualified upon receipt.

We will *not* contact you if your file is incomplete.

All applications are treated with the utmost confidentiality. After final judging is completed, personal and financial information is shredded.

Questions should be e-mailed to info@aroomofherownfoundation.org or mailed to AROHO, P.O. Box 778, Placitas, NM 87043. Phone consultation is not available.

A Room of Her Own Foundation
Literary Gift of Freedom Award Application Template
Part I: Checklist

Enclosed are *all* of the following items (in order as listed and kept as separate items—*do not run together. Do not bind or staple.* Paper clips and binder clips may be used). *This checklist is provided for your benefit and for administrative purposes only.*

The following items contain personal identifying information:

\$35 application fee (\$5 of which is a tax deductible donation*) in the form of a check or money order payable to A Room of Her Own—“GOF Application Fee” and application genre in memo line.

AROH is a publicly-funded, 501(c)(3) nonprofit organization that relies on donations in order to provide its grants and prizes. If you would like to take this opportunity to **make an additional donation to benefit creative women, please include a separate check in any amount payable to A Room of Her Own, and write “donation” in the memo line. We are grateful for your financial support.*

- Self-addressed, stamped *postcard* for acknowledgment of receipt of package
- Part I: Checklist
- Part I: Questionnaire
- Part I: Contact Information Form
- Part I: Personal Information Form with signature (include proof of residency if legal resident)
- Part I: Financial Information Form
- Part I: Verification of Income: three consecutive year’s federal tax returns (each *signed* with no attachments. Please black out any Social Security Numbers on the tax returns.) *or* Tax Return Explanation

The following items *must not* contain personal identifying information:

- Part II: Essay A. Financial Status Essay (one sheet total) PLEASE MARK AS “**A**”
- Part II: Essay B. Artistic response. Not to exceed five (5) pages (double spaced, 12 point type, 1" margins) PLEASE MARK AS “**B**” and number each page beginning B-1.
- Part II: Essay C. What writing means to me. Not to exceed five (5) pages (double spaced, 12 point type, 1" margins) PLEASE MARK AS “**C**” and number each page beginning with C-1.
- Part II: Essay D. Practical aspects and particular goal. Not to exceed five (5) pages (double spaced, 12 point type, 1" margins). PLEASE MARK AS “**D**” and number each page beginning with D-1. You may also include proposed timeline and proposed budget for project.
- Part II: Essay E. Community benefit. Not to exceed three (3) pages (double spaced, 12 point type, 1" margins) PLEASE MARK AS “**E**” and number each page beginning with E-1.
- Part III: List of educational history (high school and post secondary)
- Part III: List of prizes/awards/grants (if any)
- Part III: List of publications (if any)
- Part III: List of employment history
- Part III: List of community service, current and past
- Part IV: Writing Sample. Sample pieces of writing not to exceed ten (10) pages (doubled spaced, 12 point type, 1" margins). Please indicate genre and number each page beginning with WS-1.

Note: Incomplete and/or late applications will be disqualified upon receipt. We will not contact you if your file is incomplete. [page break]

TEMPLATE

**A Room of Her Own Foundation
Literary Gift of Freedom Award Application Template
Part I: Questionnaire**

To help us better plan for the future, please complete the following brief questionnaire. To respond to the questions, please mark your choices with an "x."

We appreciate your responses.

1. When you FIRST heard of AROHO, how did you hear of us?

- Print advertisement (specify publication) _____
- Word of mouth
- E-mail from a friend
- E-mail list (specify) _____
- Web search (specify search engine) _____
- Other (specify) _____

2. Is this the first time you've applied for the Gift of Freedom?

- yes
- no

4. National origin

- American Indian or Alaskan Native
- Asian or Pacific Islander
- African American
- Hispanic
- Caucasian

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**A Room of Her Own Foundation Literary Gift of Freedom Award Application Template
Part I: Contact Information Form**

Application packages must be postmarked on or before _____. No incomplete or late applications will be accepted. This application form is the current form—please disregard any previous forms.

Name _____

Genre submitted (mark one)

- creative nonfiction
- fiction
- playwrighting
- poetry

Date of Birth _____

Nationality _____

Mailing address _____

Phone Number _____

E-mail address (if any) _____

Applicant Signature _____

Date signed _____

My signature on this document affirms that I am applying for the _____ Literary Gift of Freedom Award and that all work contained in my application package is my own work unless properly noted. I understand that no part of my submission package is returnable and that incomplete and/or late submissions will not be accepted.

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A Room of Her Own Foundation Literary Gift of Freedom Award Application Template
Part I: Personal Information Form

Do not leave any question unanswered. If a question does not apply to you, mark it N/A.

1. Last Name _____
2. First Name _____
3. Middle Initial _____
4. Complete Street Address _____

5. City and Country (if not U.S.) _____
6. State _____
7. Zip Code _____
8. Date of Birth (month, day and year) _____
9. Permanent Phone Number _____
10. Driver's License or State ID Number _____
11. State of License or ID in number 11 _____
12. I am a citizen or legal resident* of the U.S.
 No
 Yes

*If you are a legal resident please supply satisfactory proof of residency with your Personal Information Form (Ex.—U.S. Birth Certificate, U.S. Certificate or Report of Birth Abroad, Federal Proof of Indian Blood Degree, INS American Indian Card, Birth Certificate or passport issued from a U.S. Territory, U.S. Passport, U.S. Military Identification Cards (Active or reserve duty, dependent, retired member, discharged service, medical/religious personnel), Common Access Card (only if designated as Active military or Active Reserve or Active Selected Reserve), Certificate of Naturalization or Citizenship, Northern Mariana Card, INS U.S. Citizen I.D. Card, Permanent Resident Card, Temporary Resident Identification, Non-resident Alien Canadian Border Crossing Card, Employment Authorization Card, Permanent Resident Re-entry Permit, Refugee travel document, Valid I-94 with attached photo stamped)

13. What is your marital status as of today?
 Single, divorced, widowed
 Married, remarried, partnership
 Separated
14. Month and year you were married, separated, divorced or widowed _____
15. Have you ever been convicted of possessing or selling illegal drugs?
 No
 Yes

16. Have you ever been convicted of a felony?

_____ No

_____ Yes

If you have answered “yes” to either question, we will send you an additional worksheet for you to complete to determine if your conviction affects your grant eligibility.

17. Date this form was completed (month, day, year) _____

18. Applicant signature _____

(By signing this application you are stating that the information provided is correct to the best of your knowledge and you agree, if asked, to provide information that will verify the accuracy of your completed Financial Status Form. Also, you certify that you understand that if you purposely give false or misleading information, you will immediately become disqualified for grants and A Room of Her Own will recover any grant funds disbursed.)

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A Room of Her Own Foundation Literary Gift of Freedom Award Application Template
Part I: Financial Information Form

Responses are based on personal income and personal federal income tax return for the most recent full calendar year.

Report income and assets for you and your spouse, even if you are only recently married and were not married in most recent tax year. Ignore references to "spouse" if you are currently single, separated, divorced or widowed. Do not leave any question unanswered. If the answer is zero or does not apply to you, enter N/A.

20. For the most recent full calendar year, have you completed your IRS income tax return?

- I have already completed my return.
 I will file, but I have not yet completed my return.
 I am not going to file. (Refer to the Verification of Income Statement)

21. What was your (and spouse's) adjusted gross income for the most recent tax return filed?

\$ _____

22. Enter the total amount of your (and spouse's) income tax for the most recent tax return filed.

\$ _____

23-24. How much did you (and spouse) earn from working (wages, salaries, tips, business income, etc.) for the most recent full calendar year? Answer this question whether or not you filed a tax return.

You (23) \$ _____ Spouse (24) \$ _____

25. Do you receive unearned income? (Income not from wages, salaries, or tips, or from your own business).

- No
 Yes. If yes, please state the annual amount. \$ _____

26. Can you be claimed as a dependent on someone else's income tax return for the most recent full calendar year?

- No
 Yes

27. As of today, what is the net worth of your (and spouse's) current investments? (Net worth means current value minus debt. If net worth is negative, enter 0. Investments include real estate (do not include the home you live in), trust funds, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, education IRAs, college savings plans, installment and land sale contracts (including mortgages held), commodities, etc. Investment value includes the market value of these investments as of today. Investment debt means only those debts that are related to the investments. Investments do not include the home you live in, cash, savings, checking accounts, the value of life insurance and retirement plans (pension funds, annuities, noneducation IRAs, Keogh plans, etc.) or the value of prepaid tuition plans. \$ _____

28. As of today, what is the net worth of your (and spouse's) current business? Do not include a farm that you live on and operate.

\$ _____

29. As of today what is your (and spouse's) total current balance of cash, savings, and checking accounts? Do not include student financial aid.

\$ _____

30-31. If you received veteran's education benefits, for how many months in the current fiscal year will you receive these benefits, and what amount will you receive per month? Do not include your spouse's veteran's education benefits.

Months (30) _____
Amount (31) \$ _____

32. During the school year _____, will you be working on a master's or doctorate program (such as an MA, MFA, MBA, MD, JD, PhD, EdD, or graduate certificate, etc.)?

- No
- Yes

33. Do you have children who receive more than half of their support from you?

- No
- Yes. If "yes," please give number of children _____.

34. Do you have dependents (other than your children and spouse) who live with you and who receive more than half of their support from you?

- No
- Yes. If "yes," please give number of dependents _____.

35. Are you in default on a student loan?

- No
- Yes

36. Are you a veteran of the U.S. Armed Forces?

- No
- Yes

If you or your family has unusual circumstances (such as loss of employment) not shown on this form that might affect your need for financial aid, please explain briefly:

A Room of Her Own Foundation Literary Gift of Freedom Award Application Template
Part I: Verification of Income

Please send the last three years income tax returns: send only personal federal income tax returns—income page and signature page only. ***Each return must be signed.*** If sending IRS transcripts, sign each year's transcript even though there is no signature line. Please black out any Social Security Numbers on the tax returns. Your application package must contain your three most recent consecutive returns. Do not send state income tax returns. No W-2s, no corporate or business forms. No attachments—basic form only.

Don't make tax returns anonymous. We need to see that they belong to the applicant.

If you do not have copies of your older tax returns, you can request them from the IRS. *Do not have the IRS send them to us.* All forms should be sent to you and included in the application package you send to AROHO. Plan ahead when requesting returns from the IRS. Do not send an application package with a note saying the IRS did not get your returns to you in time to include them in the package. Incomplete applications will be disqualified.

If you were not required to file a federal income tax return for one or more of the past three years, you must write a detailed explanation to AROHO to be included in your application package in place of your tax returns. Clearly mark this as Tax Return Explanation and do not exceed 225 words.

Without either returns or a detailed explanation, your application is incomplete and will be automatically disqualified.

A Room of Her Own Foundation Literary Gift of Freedom Award Application Template
Part II: Essays

Essays are crucial components of the screening process. Consider *each* essay your last, best opportunity to showcase your talent as a writer. **Do not put your name on any of these essays.** (Label each essay with appropriate title, use 1" margins, double-spacing, 12 point type)

Essay A: Financial Status

Please write a one-page essay regarding your financial status. Include a response to the following in your essay:

To what degree would the receipt of the Gift of Freedom impact the completion of your creative project?

Describe the relationship between your financial status and the actualization of your artistic project.

Essay B: Artistic response

Respond, in any genre you wish, to **one** of the following **three** quotations from Virginia Woolf's *A Room of One's Own*. Your response should not exceed five double-spaced pages (please number B-1 through B-5). Your response will not be discriminated against on the basis of any opinion expressed.

"Five hundred a year stands for the power to contemplate,...a lock on the door means the power to think for oneself."

"Poetry ought to have a mother as well as a father."

"Women have sat indoors all these millions of years, so that by this time, the very walls are permeated by their creative force, which has, indeed so overcharged the capacity of bricks and mortar that it must needs harness itself to pens and brushes and business and politics."

Essay C: What writing means to me

Write an essay, not to exceed 5 (five) pages (please number C-1 through C-5), in which you answer the following question: What does your writing mean to you? Discuss your writing, its importance to your life and everything else pertinent to this question.

Essay D: Creative Project Plan and its practical aspects

Write one essay not to exceed 5 (five) pages (please number D-1 through D-5) in which your answer the following questions: What practical steps have you already taken in the pursuit of your writing? Do you have a particular creative project which you are pursuing in your writing at the present moment? Define your creative project and its practical aspects. What specifically would you request from AROHO to help you achieve your creative plan?

Essay E. Community benefit.

Provide a description, not to exceed 3 (three) pages (please number E-1 through E-3), of how a grant to you would benefit the community at large. You may include any proposal to share profits, if any, arising from the work produced during the grant period with tax exempt, charitable organizations.

Community benefit will be considered in the selection of the recipient. At the completion of the sponsorship period, community benefit would include:

To what extent will the artistic objective benefit the larger community;

How the applicant proposes that the results of her work will be made available to the general public;

The willingness of the applicant to mentor other women artists in the future;

The recipient's willingness to contribute to tax exempt charitable organizations, including A Room Of Her Own, if the work produced as a result of the grant provides income in the future.

(From Award Criteria on our website, www.aroomofherownfoundation.org).

**A Room of Her Own Foundation Literary Gift of Freedom Award Application Template
Part III: Lists**

Do not send your résumé—please format the information in five separate, clearly labeled lists.

Do not put your name on the lists. Do not list your name as author of published work—just list the titles of the works. Lists do not need to be double spaced.

Educational History

List all educational institutions attended, beginning with high school, including years in attendance, special areas of study and diploma or degrees granted. List any other educational experiences impacting your writing career.

Prizes/Awards/Grants for Your Work, if any List

Publications, if any List

Employment History

Indicate all experiences of employment, part or full time, listing employers, position, and months and years of employment.

Community Service

List any volunteer activities or community services performed, including organizations, the activities and length of time of each.

**A Room of Her Own Foundation Literary Gift of Freedom Award Application Template
Part IV. Writing Sample**

(Do not put your name on these pages.)

Send in samples of your work, published or unpublished, not to exceed (10) ten pages (please number WS-1 through WS-10). Do not send photocopies of published work; send only manuscript format. This may be one long work or selections from several pieces. Total page count not to exceed 10 pages (double-spaced, with 1" margins in 12-point type). The first page of your writing sample should *specify genre* being submitted.

TEMPLATE