

THE AUTHORS LEAGUE FUND

Established by The Authors League of America, Inc.

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Application

The Authors League Fund provides emergency aid to authors, dramatists, journalists, critics, and poets. Apply by email, mail, or online at www.authorsleaguefund.org/apply. Your information is confidential and used solely for our review. If we learn that an applicant has misrepresented their financial need or the circumstances of their emergency, we will not be able to provide support. Visit www.authorsleaguefund.org for eligibility guidelines and Frequently Asked Questions.

Identification:

NAME:

AGE:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

TELEPHONE:

E-MAIL:

DEPENDENTS, WITH AGES:

Financial Information:

WHAT WAS YOUR TYPICAL ANNUAL INCOME PRIOR TO THE PANDEMIC?

LIST 2021 INCOME. *Include amounts and sources for all income, e.g., earned income, advances/royalties, Social Security, Disability, Unemployment/PUA, pension, investment withdrawals, and support from family, friends, charities, or state/federal agencies, as well as any pandemic relief/benefits/loans.*

LIST 2022 INCOME. *Include amounts and sources, as above.*

WHAT IS YOUR EXPECTED INCOME FOR 2023?

DO YOU RENT? *Enter monthly rent:*

DO YOU OWN? *Enter monthly mortgage payment. Have you recently refinanced or drawn equity from your home?*

DO YOU HAVE A SPOUSE, PARTNER, OR ROOMMATE WITH WHOM YOU SHARE HOUSEHOLD EXPENSES? IS YOUR SPOUSE/PARTNER EMPLOYED? *If so, enter their income. If unemployed or unable to work, please share more about the circumstances. (Not applicable for roommates.)*

LIST YOUR HOUSEHOLD ASSETS. *If you have a spouse/partner with whom you share household expenses, please include their assets. Enter figures, not account numbers. Include figures even if your accounts are low or overdrawn.*

A. Checking and savings accounts:

B. Investments and tax-deferred retirement savings:

C. Real estate/mortgage:

D. Other:

DO YOU HAVE PRIVATE HEALTH INSURANCE? *Enter premium cost:* _____ MEDICARE/MEDICAID?

LIST DEBTS, WITH MINIMUM MONTHLY PAYMENTS. *E.g., credit card, student loans, medical, home equity loan.*

SIGNIFICANT MONTHLY EXPENSES NOT ADDRESSED ABOVE.

Career Information:

LIST YOUR PUBLISHED BOOKS, ARTICLES, STORIES, POEMS, ESSAYS, PLAYS, ETC. INCLUDE TITLE, PUBLISHER, AND YEAR. DRAMATISTS: LIST PRODUCED/PUBLISHED PLAYS, WITH PRODUCTION DATES AND THEATER NAMES, AND STATE WHETHER ONE-ACT OR FULL_LENGTH. ALL APPLICANTS: *Include awards and honors, and your website, if applicable. If you have a large body of work, please submit a CV, resume, or other listing of your publications and achievements in the field.*

CURRENT WRITING PROJECT. *Include publisher and advance, if applicable.*

TO WHAT ORGANIZATIONS, GUILDS, OR UNIONS DO YOU BELONG? *E.g., Authors Guild, PEN, Freelancers Union, ASJA, AWP, RWA, SFWA, Poets & Writers.*

Emergency Circumstances:

PROVIDE A DETAILED DESCRIPTION OF YOUR EMERGENCY. USING ADDITIONAL PAGES IS ENCOURAGED. *Include relevant background information about any factors affecting your finances, health, and employment. If you are applying because you lost income due the pandemic, include specifics and feel free to share details about your experience since early 2020.*

AMOUNT REQUESTED. *Amounts are largely determined internally. Feel free to use this section to highlight the bills you are most concerned about right now.*

HAVE YOU PREVIOUSLY BEEN ASSISTED BY ALF, PEN, DRAMATISTS GUILD FOUNDATION, ARTIST RELIEF FUND, OR ANY OTHER COVID-19 RELIEF GROUPS, EMERGENCY FUNDS, OR NON-WRITING CHARITIES? *If so, enter dates and amounts. Please do not omit this information out of concern that it will affect your eligibility with us, as it does not.*

MAY WE SHARE YOUR APPLICATION WITH ORGANIZATIONS OFFERING EMERGENCY AID? *This would be an effort to assist you in receiving support. This mainly occurs when an applicant meets the guidelines for a group that gives aid by recommendation, rather than by accepting direct applications.*

HOW DID YOU LEARN ABOUT US?

DATE: