



General Information and Instructions for  
**NATIONAL ENDOWMENT FOR THE ARTS**  
**National Heritage Fellowships**

**Legal Name:** \_\_\_\_\_  
 (last) (first) (middle initial) (title)

How would you like your name(s) to appear on the award certificate? \_\_\_\_\_

**Permanent Address** (number and street): \_\_\_\_\_

(city, state and zip): \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Social Security #:** \_\_\_\_\_

**Birth Date:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_

**U.S. Citizenship:**  Yes  No **If Permanent Resident, Visa #** \_\_\_\_\_

**1. Purpose and Scope: NEA National Heritage Fellowships are awarded by the National Endowment for the Arts:**

*In recognition and support of your significant impact on and your continuing contributions to the folk and traditional arts.*

**2. Acceptance: Indicate your acceptance of this fellowship by completing this form and forwarding it to us via email or fax.** (Please make a copy for your own records.)

I accept the National Endowment for the Arts' Individual Fellowship Grant in the amount of **\$25,000**. By signing below, I certify that the information contained herein is true and correct to the best of my knowledge, and that I will comply with the Federal requirements specified below.

The Drug-Free Workplace Act of 1988 was enacted on November 18, 1988, as part of Federal omnibus drug legislation. This law requires applicants for Federal grants to certify that they will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any grant activity. (For the purposes of this Act, alcohol is not considered a controlled substance.) Your signature on this form fulfills the certification required of individuals.

A government-wide regulation for implementing the law was published in the *Federal Register* at 54 FR 4946, on January 31, 1989. It became effective on March 18, 1989. Therefore, as of that date, the Arts Endowment is not able to award any new grants to organizations or individuals unless the applicant has provided the required certification.

Are you delinquent on the repayment of any Federal debt?  No  Yes If yes, please attach explanation

*x* \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Date**