



Judith Dawn Memorial Fund for the Arts

A program for the pursuit of artistic endeavors offered to sexual assault and abuse survivors through Zacharias Sexual Abuse Center, Lake County Council Against Sexual Assault.

Judith Dawn Memorial Fund for the Arts

Zacharias Sexual Abuse Center
4275 Old Grand Avenue
Gurnee, Illinois 60031
voice: 847 244 1187
fax: 847 244 6380
email: jdf@lacasagurnee.org
url: www.lacasagurnee.org



Judith Dawn Memorial Fund for the Arts

The Judith Dawn Memorial Fund strives to recognize and support sexual assault and abuse survivors who are interested in pursuing artistic endeavors as a continuation of the lifelong healing process. Such endeavors may include any of the expressive arts listed below, and funds may be applied to related classes, private instruction, equipment, materials, and other fees. The Judith Dawn Memorial Fund wishes to offer this gift to individuals age 18 and over. A total of \$5,000 is available each funding year, which runs from June to June.

When I dare to be powerful, and use my strength in the service of my vision, then it matters less and less whether or not I am afraid.

—*Audre Lorde*

Criteria:

To be eligible for these funds, the individual must self-identify as a survivor of sexual assault or sexual abuse. The funds must be used in pursuit of an artistic endeavor such as dance, film/video, graphic arts, music, painting, photography, sculpture, textiles, theater/drama, or writing/poetry. Other expressive arts may be considered at the discretion of the Selection Committee. Applicants must reside in Lake, Cook, or McHenry counties in Illinois, or in Kenosha County, Wisconsin.

How to apply:

All applicants must complete the enclosed application form and submit it along with one or more letters of recommendation. The recommendation(s) should be offered by an individual familiar with the applicant's interest in the arts and with the impact such pursuits may have on her/his healing process as a sexual assault or sexual abuse survivor. Applicants may also be invited to meet with the Selection Committee for an interview before funding decisions are made.

Send your completed application and letter(s) of recommendation to:

Judith Dawn Memorial Fund
Zacharias Sexual Abuse Center
4275 Old Grand Avenue
Gurnee, IL 60031

Deadline and Notification:

There are two application deadlines during each funding year. Applications received by June 30 each year will be reviewed by the Selection Committee in July or August. Applications received by December 31 each year will be reviewed in January or February. Applicants will be notified by phone or mail within two weeks of the Selection Committee review meeting. All applicants must then contact Zacharias Sexual Abuse Center within 30 days to accept their awards and make arrangements for disbursement.

Applicants will have one year from the date of notification to use their awards. After one year, unused awards will be returned to the Judith Dawn Fund and made available to other applicants. Approved applicants may not reapply to the Judith Dawn Fund for a period of one year after approval.

Application Instructions

The following instructions will help guide you through the application form. Most applicants choose to attach additional sheets of paper to allow for more detailed responses.

1. Fill in your full name.
2. Provide your date of birth (optional).
3. Fill in your home address, including street address, city, state and ZIP code.
4. Fill in your home phone number, including area code.
5. Fill in your work phone number, if any, including area code. Please do so only if we are permitted to contact you at work.
- 6a. Put a checkmark in the boxes listing area of creative expression you have previously explored. You may check as many as apply to you. Use "other" to fill in anything that is not listed.
- 6b. Describe your past experience with creative/artistic expression. You may use a separate sheet of paper if needed.
- 6c. If you have never pursued the arts in the past, tell us why. (For example, were you afraid or embarrassed? Were you prevented by financial constraints?)
7. Put a checkmark in the box listing the area of creative expression you now wish to pursue using these funds. Please check only one box. Use "other" to fill in anything that's not already listed.
8. Put a checkmark in the box which best describes how and when you plan to use these funds. Explain in more detail if you check "self-directed endeavor" or "other."

9. If you will be attending formal classes, please provide the name, address, and phone number for the school you will be attending. Provide contact information for your teacher if you will be receiving private instruction.

10. Please list the title(s) of the class(es) you plan to attend. Please be sure to attach a copy of the course description from the school's course catalog.

11. Tell us whether you have already been accepted by the school or program of your choice, and, if not, when you expect to know.

12. Give us the estimated cost of classes, equipment/material/supplies, or other costs these funds will be used for, as applicable. Fill in all areas that apply. Use a separate sheet to itemize or explain these costs, as requested.

13. Briefly explain why you wish to pursue the artistic endeavor. We encourage you to use additional paper as needed.

14. Please tell us how you became aware of this program.

NOTE: When using a separate sheet of paper for any of your responses, please number the items to correspond with the item number on the application form.

Applicants are welcome to submit supplementary materials, such as copies or artwork, poetry, etc. Unfortunately, such items will not be returned to the applicant, so they should not include any original works.



APPLICATION FOR FUNDS

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Judith Dawn Memorial Fund for the Arts APPLICATION

1. Name (First/Middle/Last): _____

2. Date of Birth (Must be 18 or older to be eligible): _____

3. Home address: Street Address _____

City/State/Zip Code _____

4. Home Phone: _____

5. Work Phone (optional): _____

6a. What areas of creative or artistic expression have you explored in the past?

(Check all that apply)

Dance Film/Video Graphic Arts Music Painting Photography

Sculpture Textiles Theater/Drama Writing/Poetry Other (please explain)

6b. Please briefly describe your past experience with artistic endeavors. If possible, include when you were involved, how long you pursued a particular form of creative expression, and how the experience affected you. (Please use additional paper if you need extra room.)

6c. If you have never pursued any form of artistic expression in the past, please explain what, if anything, prevented you from doing so.

7. What type of artistic expression do you wish to pursue using these funds?

Dance Film/Video Graphic Arts Music Painting Photography

Sculpture Textiles Theater/Drama Writing/Poetry Other (please explain)

8. How do you plan to use these funds?

Formal school classes from _____ to _____

Private instruction beginning _____ ending _____

Self-directed endeavor (please explain) _____

Other (please explain) _____

9. Name, location, and phone number of school or private instructor:

Name: _____

Address: _____

Phone: _____

10. Course title(s) (if applicable): Please attach course description.

11. Have you already been accepted by the school/program of your choice?

Yes No Does not apply

If not, when will you know if you have been accepted? Date: _____

12. Estimated cost of education, instruction, or self-directed endeavor:

(Please itemize on a separate sheet of paper)

Classes: \$ _____

Equipment/Materials/Supplies: \$ _____

Other fees: \$ _____

13. Please tell us why it is important to you to pursue this endeavor, and what you expect to gain from it. Use additional paper if necessary.

14. How did you hear of the Judith Dawn Memorial Fund for the Arts?

I understand that Zacharias Sexual Abuse Center cannot guarantee the amount of funds that will be distributed on behalf of any particular recipient, and that disbursement will be made to the school or vendor, not directly to the award recipient, unless arrangements are made for reimbursement.

I understand that by submitting this application, I am identifying myself as a survivor of sexual assault and/or sexual abuse. However, my rights to confidentiality associated with any services received at Zacharias Sexual Abuse Center or other organization will not be compromised in any way.

I affirm that all the information contained in this application is accurate. I further affirm that I am a survivor of sexual assault or sexual abuse and that I am at least 18 years of age.

Applicant signature _____

Date _____

Send your completed application and letter(s) of application to:

Judith Dawn Memorial Fund
Zacharias Sexual Abuse Center
4275 Old Grand Avenue
Gurnee IL 60031

Confidentiality

The Judith Dawn Memorial Fund for the Arts is committed to maintaining confidentiality for each applicant. Personal information, such as name, address, and phone number, is known only to the staff contact at Zacharias Sexual Abuse Center. Each application is assigned a number, and applications are reviewed by the Selection Committee by application number only.

The Selection Committee consists of the Zacharias Sexual Abuse Center staff contact, a board member, and a volunteer. The donor attends meetings as an advisor but does not take part in the selection process.

If you wish to be kept informed about events and other information about the Judith Dawn Memorial Fund for the Arts, you must check the box below.

Please keep me informed about events and other activities related to the Judith Dawn Memorial Fund for the Arts.

Signature and Date

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The Judith Dawn Memorial Fund was established at Zacharias Sexual Abuse Center in memory of Judith Dawn Hickey, an artist and sexual abuse survivor. Its purpose is to provide funds for other survivors who wish to pursue the creative arts as a means of healing, empowerment, and self-expression.

Judith died in January, 1998, at the age of forty-eight, from complications resulting from colon cancer. Throughout her life she pursued her healing through involvement in adult sexual abuse survivor groups, recovery programs, individual therapy, and finally, through her artwork. Her paintings are currently in private collections and in several galleries and other showcases

in the San Diego area, where she was born and spent her adult life. Other examples of her work can be seen at Zacharias Sexual Abuse Center and several other area agencies that support and counsel sexual assault and abuse survivors.

Shortly before her death, she expressed a wish to have a program established through which other survivors could find the healing she found by pursuing her natural talent as an artist.

Funding for the Judith Dawn Memorial Fund for the Arts is provided entirely through private donations from a relative of Judith's who is also a sexual abuse survivor.

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