

ISGCI MAE Funds Application

* Required

Demographic Information Section

What is your legal name?*

(i.e. the name you use for banking and official documents - first and last)

Your answer * _____

What is the name you use?

You can leave this question blank if this is not different than your legal name

Your answer * _____

What is your email?*

Your answer* _____

What is your phone number?*

Your answer * _____

What is your preferred communication method?*

Email

Text Message

Phone Call

What is your home address?* _____

City _____ ZIP CODE _____

What are you applying for assistance with?*

Legal Name

Other _____

Minerva Authenticity Endowment (MAE) Fund Information

The Minerva Authenticity Endowment (MAE) Fund will help transgender and non-binary people in Idaho with costs associated with legal name changes, as well as other needs associated with transition.

Please note we do not send money to the individual in need. We remit payment to the providers

of the services being paid.

For legal name & gender marker change assistance, the typical request is \$350 - \$500, and is only provided one time per year, per individual.

For assistance with other costs associated with gender transition the assistance maximum (per application) is \$200, and annual assistance maximum (per individual) is \$600.

What are you applying for assistance with?*

Legal Name

Other : _____

MAE Fund: Name

Verification Statement*

Do you verify that you are or your client is indeed transgender or non-binary, and in need of emergency financial assistance for legal name?

I do

I do not

Statement of Need*

Please provide us a short description of the need for financial assistance

Your answer* _____

Account Number*

Please provide the client account number.

Your answer * _____

Please select all steps of the name/gender marker change process you'll be needing financial assistance for.*

County Court Petition

County Newspaper Publication

Social Security Card (SSA)

Driver's License / ID Card

Idaho Birth Certificate

[] Other: _____

Court Petition

If applying for assistance for the court petition for name change, please provide the county payment is to be given, as well as the amount needed.

Your answer _____

Newspaper Publication

If applying for assistance for the county newspaper publication of name change, please provide the name of the designated county newspaper that payment is to be given, as well as the amount needed.

Your answer _____

Social Security Card

If applying for assistance with name/gender marker change on your social security card, please provide the amount needed.

Your answer \$ _____

Driver's License / ID Card

If applying for assistance with name/gender marker change on your driver's license and/or ID card, please provide the amount needed.

Your answer \$ _____

Birth Certificate

If applying for assistance with name/gender marker change on your birth certificate, please provide the amount needed

Your answer \$ _____

Thank you for completing the ISGCI Funds Application. You should be hearing from a member of the ISGCI Board promptly. You can reach out to isgcigeneral@gmail.com with any further questions.