



MARSHALL COMMUNITY FOUNDATION GRANT APPLICATION

FY: __Spring 2018__

Applicant Information

Name of Organization/Grantee	
Federal Tax Exempt ID# We MUST have this number. If the applicant is not a 501(c)(3) organization, a unit of government or a public agency, this number should be the fiscal agent's number. A fiscal agent is a non-profit entity that agrees to act as the sponsor for an organization that does not have tax-exempt status (see page 2).	Tax ID # _____
Contact Name	
Title	
Mailing Address	
City, State ZIP	
Phone and Fax	
Email	
Website	

Tax Status (please select appropriate type)

	501(c)(3) Public Charity		Public Agency
	Unit of Government		Other (please describe and attach appropriate documentation)



The IRS requires that public charities, like the community foundation, award grants to a suitable entity. If the applicant named above is not a 501(c)(3) public charity or a public entity, a fiscal agent must be secured locally to ensure compliance with IRS rules and regulations. A fiscal agent is a non-profit or public entity that agrees to assume ownership of the grant award and the community asset that results from the grant award. For example, the City could be a fiscal agent for a grant related to the annual community celebration.

Fiscal Host Information (if applicable)

Name of Organization/Grantee	
Federal Tax ID # <i>(required)</i>	
Mailing Address	
City, State, Zip	
Website	
Contact Name with this Organization	
Contact Title	
Contact Phone	
Contact Email	
Signature	

Proposal Information

Project Title			
Project Start Date		Project End Date	
Please provide a brief summary of the request:			
Counties served by this project:			
Indicate the projected number to be served by your project:			
_____ People	_____ Agencies	_____ Businesses	_____ Communities
Amount Requested: \$ _____		Total Project Cost: \$ _____	



Proposal Narrative

Provide a brief narrative that addresses each of the following points. Submit one original and one copy of your proposal. This narrative should be less than two pages and include the following:

- **Organizational History:** Briefly describe your organization. Attach a copy of your IRS Determination Letter or documentation from your fiscal host as outlined on page 2.
- **Program Goals:** What do you hope to accomplish through the project? What is the focus?
- **Methods:** How are you going to accomplish the goals? What combination of activities and strategies have you selected to bring about the desired results? Why did you select this approach?
- **Evaluation:** How will you measure your results/impact?
- **Budget:** Please complete the attached budget on page 4. In addition, provide a budget narrative, detailing the items on the budget page (i.e. a consultant hired for 200 hours at \$75/hour). Be specific.

Send completed application to:

EMAIL

give@marshall-cf.org

or

For other arrangements or questions, contact Jeff Cordes (jeff.cordes@live.com, 507.828.8383).

Authorization

I certify that the information contained in this grant application is true and correct to the best of my knowledge. I have the authority to apply for the dollars requested.

Name of top paid staff or board chair: _____ Title: _____

Signature: _____ Date: _____

Budget

A. How much will your total project cost?

B. How much are you requesting from the



_____ Community Foundation?	
C. How much have you or will your receive from other contributors? <i>(B + C must equal A)</i>	
D. Describe how this money and other contributions will be spent <i>(The total of D must equal A)</i>	
E. How many hours do you estimate that people will spend working on this project?	
F. List any “in-kind” contributions <i>(in-kind contributions are gifts of goods or services instead of cash)</i>	