

Community Mini-Grant Application (2024-2025)

The following document contains the list of questions that are included on the online application form.

The <u>Grinnell College Community Mini-Grant Program</u> provides funding to support small- to mid-scale projects that enhance the quality of life in our community for current and potential residents. Recognizing that area nonprofits need to be healthy to advance their important work, grants also support projects that build organizational and financial capacity for nonprofits serving the Grinnell area. You can download the questions here to better prepare for completing the online application. All instruction links will open a new window.

Application Timing

Two cycles of mini-grants will be offered in the 2024-2025 academic year:

Cycle 1 – Applications must be received by midnight Friday, October 25, 2024. Awards will be announced on or before Friday, December 6, 2024.

Cycle 2 – Applications must be received by midnight Friday, April 4, 2025. Awards will be announced on or before Friday, May 16, 2025.

How to Apply
Support Areas
Grant Amounts
Grant Reporting

Exclusions

Please review the full list of exclusions before you begin the application.

Application Instructions

It is best to keep answers short and to the point. The Mini-Grant Review Committee will reach back out to the applicant if there are questions or additional information is needed. Also, the applicant is encouraged to contact the Office of Community Partnerships, Planning, and Research if there are questions while completing the application or additional clarification is needed. Call 641-269-3900 or email at communityenhance@grinnell.edu.

In checking the boxes below, I certify that I am completing this application on behalf of a qualifying governmental or non-profit organization with 501(c)3 tax exempt status (or I am submitting this application under a qualifying fiscal agent.) I have also read the list of exclusions. Please check both boxes to continue.

exclusions. Flease check both boxes to continue.
I am submitting on behalf of a qualifying organizationI have read the list of exclusions
SECTION I: ORGANIZATION DETAILS
Name of the Organization:
Address of the Organization:
Contact Name and Title:
Best Contact Phone Number:
Contact E-mail Address:
Alternate Contact Name, Title, Phone Number, E-mail Address:
Organization's Tax ID Number:
Name of Fiscal Agent (leave blank if not applicable):
Fiscal Agent's Tax ID Number:
Please indicate which Tax ID Number to use:
Organization Fiscal Agent

SECTION II: PROJECT SUMMARY

- Project Name:
- Amount of Funding Requested:
- DESCRIPTION: Please provide a short description summarizing your project.
- TIME FRAME: On what date or dates would your proposed project take effect? Describe the project's timeline including date(s) of implementation.



SECTION III: PROJECT RATIONALE

•	RELEVANCE: Will this project enhance the social or economic vitality of our community
	(for example cultural, recreational, and educational projects, those addressing human
	needs, and/or those enhancing the safety and beauty of our surroundings)?
	Alternately, will this project strengthen your organization's capacity in the long term?
	(check one box below)
	Enhance social and/or economic vitality of the community
	Provide financial or structural capacity building for our organization

- Please explain your answer.
- BENEFIT: Who is the proposal intended to benefit?
- PARTNERSHIPS: Describe the extent to which this project is a collaboration or partnership with other community entities.
- INNOVATION OR IMPROVEMENT: How does this idea incorporate elements that are new and/or improved over what has been done in the past?
- INCLUSION AND ACCESS: How will you ensure your project will be accessible and inclusive for a wide range of people within the community? Consider factors such as age, race, language, income, ability, and/or gender.
- PROMISE: What evidence do you have that this project will achieve the desired results?
- FINANCIAL SUSTAINABILITY: What is your goal for ensuring future financial sustainability for this project?
- ADDITIONAL INFORMATION: Is there anything else that the review committee should know?

SECTION IV: PROPOSED BUDGET

5.

•	• EXPENSES: Please detail the out-of-pocket expenses you will incur to bring this proje to life. Make sure to list all expected costs including the value of staff time.		
	1.	\$	
	2.	\$	
	3.	\$	
	4.	\$	
	5.	\$	
	Total	\$	
•		kind (rces of funding you are seeking or already vs. cash), please indicate as such, and ach contribution.
	1. Mini-Grant Amount Requested		\$
	2.		\$
	3.		\$
	4.		\$
	5.		\$
	Total		\$
 FUNDING SOURCES (CONT'D): For each funding source, please indicate whether the funds are anticipated (A) or already granted (G). Answers will carry over from previous section. 			
	1. Mini-Grant Amount Requested		A
	2.		A or G
	3.		A or G
	4.		A or G

A or G



Planning, and Research

- EXPLANATION OF EXPENSES VS TOTAL FUNDING SOURCES: If applicable, please explain why expenses are not equal to total funding sources.
- PARTIAL FUNDING: How would a partial mini-grant award affect the project? Would the project be scaled back? Please explain.
- If you would like to share any supporting documents, please upload your first attachment here. You can also email.
- If you have a second document, please upload here. You can also email.
- Organization's Authorized Signer: (If applying with another organization acting as fiscal agent, fiscal agent approval will also be required)
- Fiscal Agent's Authorized Signer Contact Name and E-mail Address: (We will reach out to the fiscal agent authorized signer for confirmation and approval.)
- By choosing "I agree", I verify that the facts put forth in this application are true to the best of my knowledge. If funded, I will 1) meet with the Office of Community Partnerships, Planning, and Research regarding the progress of the project and 2) if requested, present the project outcomes to the Community Mini-Grant Review Committee and the Grinnell College campus community.

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	i agree