



## Community Mini-Grant 2020-2021 Application

The Community Mini-Grant Program provides supportive funding for small- to mid-scale projects designed to enhance the quality of life in our community by addressing issues of importance to current and potential residents. Recognizing that area nonprofits need to be healthy to advance their important work, grants may also support projects that build organizational and financial capacity for nonprofits serving the Grinnell area.

### How to Apply

Please complete this application to describe the proposed project. Applications need not be submitted on the application form itself, but if typed separately should not exceed one page (front and back). Submissions must also include a project budget (not to exceed one page) and signature attesting to the veracity of the application.

### Application Timing

Two cycles of mini-grants will be offered in the 2021-2022 academic year:

- **Cycle 1** – Applications must be received by midnight Sunday, October 31, 2021. Awards will be announced on or before Friday, December 10, 2021.
- **Cycle 2** – Applications must be received by midnight Friday, April 8, 2022. Awards will be announced on or before Friday, May 20, 2022.

### Grant Guidelines

Funding will focus on initiatives that strengthen the social and economic vitality of our community including cultural, recreational, and educational projects, those addressing human needs and those enhancing the safety and beauty of our surroundings for the benefit of current and potential Grinnell residents. Grants may also support projects that build organizational and financial capacity for nonprofits serving the Grinnell area.

Preference will be given to proposals that:

- 1) demonstrate collaborative partnerships in the community,
- 2) have connections to the community of Grinnell,
- 3) improve over what has been done in the past,
- 4) have promise of making meaningful impact on the Grinnell community.

### Grant Amounts

No application will be rejected based solely on the amount requested. However, the program is primarily intended to support requests ranging from \$1,000-\$7,500.

### Grant Reporting

All grant recipients will be required to 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 Mini-Grant Committee and the Grinnell College campus community.

### Exclusions

Generally, the program does not support: Individuals; business ventures; high school sports organizations; non-governmental organizations without IRS 501(c)(3) tax exempt status; organizations that limit membership and services based on race, religion, color, creed, sex, sexual orientation, age, or national origin; reimbursement for projects that have already taken place or been completed; requests for loans or debt retirements; operating expenses or

endowments of organizations; civic, labor, sorority or fraternal groups; political organizations, projects or endowments of organizations without connection to the community of Grinnell; and projects or organizations that might in any way pose a conflict with the mission, goals, or programs of Grinnell College.

### 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. Office # 641-269-3900 or e-mail at [communityenhance@grinnell.edu](mailto:communityenhance@grinnell.edu).

### Submitting Completed Application

Submit completed application, with signature, to:

Mini-Grant Review Committee  
Office of Community Partnerships, Planning, and Research  
1127 Park Street  
Grinnell, IA 50112  
[communityenhance@grinnell.edu](mailto:communityenhance@grinnell.edu)  
Office phone: 641-269-3900

## Community Mini-Grant 2020-2021 Application

### SECTION I: ORGANIZATION DETAILS

Name of the Organization:

Address of the Organization:

Contact Name, Title:

Phone Number & E-mail Address:

Alternate Contact Name, Title,  
Phone Number & E-mail Address:

Organization's Tax ID Number:

Name of Fiscal Agent:  
(if applicable)

Fiscal Agent's Tax ID Number:

Please indicate which Tax ID Number to use  
for this grant (*Organization or Fiscal Agent*):

## SECTION II: PROJECT OVERVIEW

Project Name:

Amount of Funding Requested:

## SECTION III: PROJECT SUMMARY

### A. DESCRIPTION:

Please provide a short description summarizing your project.

### B. TIME FRAME

On what date or dates would your proposed project take effect? Describe the project's timeline including date(s) of implementation.

## SECTION IV: PROJECT RATIONALE

### A. RELEVANCE

Please describe how this project would enhance the social or economic vitality of our community (for example cultural, recreational, and educational projects, those addressing human needs, and those enhancing the safety and beauty of our surroundings). Alternately, please explain how this project would strengthen your organization's capacity in the long term.

**B. BENEFIT**

Who is the proposal intended to benefit?

**C. PARTNERSHIPS**

Describe the extent to which this project is a collaboration or partnership with other community entities.

**D. INNOVATION OR IMPROVEMENT**

How does this idea incorporate elements that are new and/or improved over what has been done in the past?

**E. 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, disability, and gender.

F. PROMISE

What evidence do you have that this project will achieve the desired results?

G. FINANCIAL SUSTAINABILITY AND CAPACITY BUILDING

What is your goal for ensuring future financial sustainability for this project? Will this project contribute to the long term structural and financial capacity of your organization? If so, how?

H. ADDITIONAL INFORMATION

Is there anything else that the review committee should know?

## SECTION V: PROPOSED BUDGET

### A. EXPENSES

Please detail the out-of-pocket expenses you will incur to bring this project to life. Make sure to list all expected costs including staff time.

1. \_\_\_\_\_ \$ \_\_\_\_\_
2. \_\_\_\_\_ \$ \_\_\_\_\_
3. \_\_\_\_\_ \$ \_\_\_\_\_
4. \_\_\_\_\_ \$ \_\_\_\_\_
5. \_\_\_\_\_ \$ \_\_\_\_\_

**\*\*Total Project Expenses:** \$ \_\_\_\_\_

### B. FUNDING SOURCES

Please list all other sources of funding you are seeking or already have in place. For each funding source, please indicate whether those funds are anticipated (A) or already granted (G). If contributions are in-kind (vs. cash), please indicate as such, and estimate the dollar value associated with the contribution.

- |    |  |          | (If Anticipated)     |
|----|--|----------|----------------------|
|    |  | A or G   | <u>Decision Date</u> |
| 1. | Grinnell College Mini-Grant requested amount _____ | \$ _____ | _____                |
| 2. | _____  | \$ _____ | A or G _____         |
| 3. | _____  | \$ _____ | A or G _____         |
| 4. | _____  | \$ _____ | A or G _____         |
| 5. | _____  | \$ _____ | A or G _____         |

**\*\*Total Funding Sources:** \$ \_\_\_\_\_

*\*\*Please note that Project Expenses and Total Funding Sources should be equal. If not, explain difference in next question C. Explanation of Expenses and Total Funding Sources.*

### C. EXPLANATION OF EXPENSES VS TOTAL FUNDING SOURCES

If applicable, please explain why expenses are not equal to total funding sources.

D. PARTIAL FUNDING

How would a partial mini-grant award affect the project? Would the project be scaled back? Please explain.

Organization's Authorized Signer *(If applying with another organization acting as fiscal agent, authorized signer from fiscal agent is also required)*

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Signature

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Title

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Date

Fiscal Agent's Authorized Signer *(Signature required if using a fiscal agent)*

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Signature

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Title

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Date

With my signature, 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.