

# NORTHWEST MINNESOTA FOUNDATION GRANT PRE-PROPOSAL FOR FUNDING

You may reproduce this form on your computer

## ORGANIZATION INFORMATION

Applicant organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact person/title \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail address \_\_\_\_\_

IRS tax exempt status (check one)  Public  501(c)(3) Federal I.D. number \_\_\_\_\_

## FINANCIAL INFORMATION

Total project cost \$ \_\_\_\_\_ Amount requested from NMF \_\_\_\_\_

Other funding sources to which you are applying for this project:

<u>SOURCE</u>	<u>REQUESTED AMOUNT</u>	<u>COMMITTED OR PENDING</u>	<u>DATE OF COMMITMENT</u>
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## PROJECT INFORMATION

Project title \_\_\_\_\_

Project duration (list beginning and end dates) \_\_\_\_\_

Brief summary of your request \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Geographic area to be served by project \_\_\_\_\_

Grant category (check one)  Community Planning Program  
 Caring Communities Program  
 Community Connections Program  
 Natural Resources Program

## EXECUTIVE DIRECTOR OR BOARD CHAIR

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### For NMF Office Use Only

Application # \_\_\_\_\_

Serial # \_\_\_\_\_

Date Received \_\_\_\_\_

(OVER)

**PROJECT DESCRIPTION** (Please limit information to this sheet. Do not submit additional materials unless requested.)

1. Please describe the opportunity, challenge, issue or need that your proposal addresses.
2. How will your project address the above situation?
3. How will you know if you succeed?

Revised 4/09