**Blue Earth Community Foundation**

**Grant Application**

Name of Organization/Individual: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tax ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the organization have a Tax-Exempt status? Yes/No

Is there a Board to oversee this program / service? Yes/No

If yes, please indicate the number serving on the board: \_\_\_\_\_\_\_

Name of Board President or Chairperson:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board President/Chair Email and Phone:

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the amount of funding your organization is requesting?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe how you will spend the funding request amount and the timeline for implementing your project:

Has this program / service been offered before in our area? Yes/No

Is the funding for a new program or an existing one? Existing / New

How will this program / service make a difference in the individuals / community served?

Who will the program serve? (Check all that apply)

\_\_\_\_\_Youth 0-5

\_\_\_\_\_ Youth 6-11

\_\_\_\_\_ Youth 12-18

\_\_\_\_\_ Adults

Note: Please attach a budget for this project.

Please return application and budget to:

Blue Earth Community Foundation

P.O. Box 390

Blue Earth, MN 56013