



Straits Area Community Foundation  
Mini-Grant Application  
**Grant Deadline: January 15**

Legal name of organization applying: \_\_\_\_\_

Executive Director: \_\_\_\_\_ Phone: \_\_\_\_\_  
*(superintendent or principal if for a school)*

Project contact person and title: \_\_\_\_\_

Primary address for correspondence: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Title and date of program/project: \_\_\_\_\_

Amount requested (not to exceed \$300): \_\_\_\_\_

Program description: Describe the project giving a brief overview of how it will be carried out, who will benefit from it, and any other general information to show how the grant funds will be utilized.

Applicant organization: Briefly describe the applicant organization.

Project budget: Include a list of anticipated revenue and expenses.

Additional materials to submit:

- Copy of IRS determination letter of 501 (c)(3) status
  - attached to this application
  - on file at the Foundation
- A current list of the board of directors

*Straits Area Community Foundation considers common mini-grants once a year. An original application should be submitted to the Foundation office at P.O. Box 495, Alpena, MI 49707 by January 31 for review by the grant screening committee.*

**Certification**

To the best of my knowledge and belief, statements in the foregoing application are true and correct; the document has been duly authorized by the governing body of the applicant; and the applicant organization will comply with applicable laws, regulations, terms and conditions in effect at the time of the grant.

I understand that SACF, in evaluating this grant application, may, if it deems appropriate, review any and all of the information submitted as part of this request with advisors of the Foundation's choosing.

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Signature of President or Executive Director of Applicant Organization Date  
*(Superintendent or Principal if for a school)*

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Printed Name and Title

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Signature of Project Contact Person Date

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Printed Name and Title

**\*Note: If you complete this form on your computer, you may save it to your own computer. Mini-grant applications must be submitted by mail to SACF, P.O. Box 495, Alpena, MI 49707. Once you have completed the application, please print two copies: one with correct signatures to mail to our office, and one for your records.**