



Grant Application Packet

Miami County Community Foundation

Our Grant Award Process: Please review the **Grant Guidelines** to make sure your project falls within the Community Foundation's area of granting. We encourage you to call our office and speak with the Foundation staff to talk about your project. **There are no specific deadlines. We accept proposals on a continuous basis.**

Community Support Grants: Organizations seeking grants in the range of several hundred to several thousand dollars. *See Page (3-6)*

Granting Guidelines: The geographic area we serve is Miami County and the communities thereof.

Grant making areas of interest are:

- Education
- Human Services
- Environment
- Recreation
- Health
- Arts & Culture
- Civic

The Community Foundation favors activities that:

- Reach a broad segment of the community, especially those citizens whose needs are not being met by existing services that are normally expected to be provided by private rather than government sources.
- Request seed money to realize innovative opportunities to meet needs in the community.
- Stimulate and encourage additional funding.
- Promote cooperation and avoid duplication of effort.
- Help make a charitable organization more effective and efficient and better able to be self-sustaining.
- One time projects or needs.

The Community Foundation places a lower priority on the following.

- Projects where the Miami County Community Foundation is the sole funder.
- Grants to any organization for the purpose of maintaining an on-going operating budget or for public schools.
- Fund-raising projects.

The Foundation will not consider grants for:

- Religious organizations for the sole purpose of furthering that religion. (This prohibition does not apply to funds created by donors who have specifically designated religious organizations as beneficiaries of the funds)*
- Political activities or those designated to influence legislation.
- National organizations. (Unless the monies are to be used solely to benefit citizens of Miami County)
- Grants that directly benefit the donor or the donor's family.
- Contributions to endowments, except in the case of Sustainability Awards.

Deadlines: We accept applications and proposals on a continuous basis. There are no specific deadlines. However, please keep in mind that it takes approximately four to six weeks to review proposals and inquiries and to contact you with an initial response. If you do not receive acknowledgement of your funding request, or have not received a status update after six weeks, please send an email to the attention of Corinne Becknell Lucas at corinne@nicf.org.

Community Support Grants: This application is for organizations seeking smaller programming grants in the range of several hundred to several thousand dollars per grant. These grants are designed to be awarded to several organizations and provide support throughout the community.

The application can be found on page 3 of this document.

Those who submitted an application and did not receive confirmation within one week should contact the NICF Office. You may be asked to give an interview with the Grant Committee or be asked to provide more information about your project. Site visits may also be conducted by the Grant Committee.

You are strongly encouraged to contact Corinne Becknell Lucas, Associate Director at the Northern Indiana Community Foundation, Inc. to discuss your project before submitting your Letter of Intent Form at 574-223-2227, toll free at 877-432-6423, or email corinne@nicf.org.

Review your project in consideration of the Grant Guidelines mentioned on page 1.





Community Support Grants:
Miami County Community Foundation
A Fund Affiliate of the Northern Indiana Community Foundation
227 East 9th Street, P.O. Box 807
Rochester, Indiana 46975
(574) 223.2227 | Toll Free (877) 432.6423

COMMUNITY SUPPORT GRANT APPLICATION
for smaller grant requests

Name of Group or Organization: _____

Contact Name: _____

Address: _____

Federal ID #: _____

Date: _____

Telephone: _____

Fax: _____

E-Mail Address: _____

Website: _____

Print or type the name of the program, as it would appear on the award:

Dollar amount requested: _____

All Entries Must Include:

- _____ Application Form
- _____ Summary
- _____ Budget Summary
- _____ Supplemental Materials (if applicable)

Send by email (preferred), mail or deliver your Submissions To: Northern Indiana Community Foundation, Inc. ATTN: Corinne Becknell Lucas, Associate Director 227 East 9th Street, P.O. Box 807 Rochester, IN 46975
corinne@nicf.org

**MIAMI COUNTY COMMUNITY FOUNDATION
COMMUNITY SUPPORT GRANT
Project Summary**

What is your project?

What have you accomplished in Miami County?

BUDGET SUMMARY

Project/Activity Expenses

- How the project money will be spent.
- Please place an * next to the items for which you are requesting funding from the Community Foundation.
- Also list items from top to bottom in order of importance to the success of the project.

Item	Amount	% of Total Project
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL PROJECT/ACTIVITY EXPENSES:	_____	_____

Attach copies of best estimates, contractor proposals or any information that will help the committee understand your organization and/or project. (one copy)

Additional Information

- Please list other organizations where you have applied for funding:



227 East 9th Street, P. O. Box 807
Rochester, Indiana 46975
Phone: (574) 223-2227 • Toll Free: (877) 432-6423
Fax: (574) 224-3709 • www.nicf.org

Verification of Charitable Use of Funds

We verify, that as a duly appointed representatives of an organization that is not a 501(c)(3) corporation, we will use any and all funds received through the Northern Indiana Community Foundation for charitable purposes.

If at any time, the Grant Committee or Board of the Northern Indiana Community Foundation, Inc. determines that the funds distributed to our organization were not used in a charitable manner, we agree to repay those funds to the Northern Indiana Community Foundation, Inc. for redistribution to an organization that will use them in a not-for-profit manner.

Funds will be used for activities as outlined in the attached application.

Name of Organization

Printed name of duly appointed representative and title held within the organization

Signature

Date

Printed name of duly appointed representative and title held within the organization

Signature

Date