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Starke County Community Foundation

Community Wellness Grant Application

To provide support to charitable public health organizations and programs that strengthen and improve community health for the people of Starke County

Guidelines: These grants are intended to support local charitable public health organizations or programs that focuses on the health and wellness of the residents of Starke County, Indiana.

To apply, all interested organizations should complete the application include required attachments and email to corinne@nicf.org. **Up to \$1,500.00** is available.

Starke County Community Wellness Grant

Application for Funds | Deadline Date: May 3, 2021

Name of Organization:

Name of Fiscal Agent, if applicable:			STARKE COLINITY
Name of Program/Service:			COMMUNITY
Address:			A FUND AFFILIATE OF NICE
Contact Person:	Phone:	Email:	
Narrative: Please limit your narrative to request, and then provide supporting inform	. •	• •	-
1. What are your organization's mis	ssion, goals and se	ervices?	
2. Describe the program concisely.			
3. How will healthcare, wellness an people will benefit?	d our community	benefit from this program?	? How many
Please include the following in	your request:		
 Narrative Program Budget Other Sources of Financial or Colla List of Board and/or Advisory Common Documentation or publications that 	mittee Members.	r program.	
Signature of Person Submitting Request: _		D)ate: