



126 First Avenue SE  
 Grand Rapids, MN 55744  
 218-326-7728

## GRAND ITASCA FOUNDATION GRANT APPLICATION

<b>Internal Grants</b> (For Office Use Only)
Request #: _____
Date Received: _____
Amount \$: _____
Fund: _____
Approved by: _____
Date: _____

Submit this completed form (typed copy preferred) to the Grand Itasca Foundation. Attach all information that may be helpful in supporting your request. Please provide 10 copies of your request when you return it. If you have any questions, please call the Foundation office at 326-7728.

The request is not complete until you obtain the signatures indicated on the back page.

1. Date Submitted: (Deadline: January 1st and July 1st)	Phone: _____
2. Name or Originator: _____	Title: _____
3. Department: _____	
4. Project Description: _____	
5. Amount of Request: _____ <small>(Detailed budget must be attached. Include an itemized budget for multi-year requests and any projected revenues that may be used to offset expenses.)</small>	
6. Length of Project: _____ <small>All successful grant applicants must submit a performance report to the Foundation within 30 days after project completion. In addition, multi-year projects require an annual performance report. No further support will be considered unless a performance report is on file.</small>	
7. Reason Grant Funds Are Needed (add extra sheets if necessary): Who and how many will be served?	

8. How will you measure your results?


9. Other information pertaining to your grant request?


10. When will the funds be needed?

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11. If this grant is not funded by the Foundation, how will this affect the project?


12. If continued, how will this project be funded in the future?


13. Signature approvals for Grant Request:

I have reviewed this grant and ascertain that this request falls within Grand Itasca strategic direction and goals.

	Signature	Date
Originator:		
Department Head:		
President:		