

ORGANIZATION INFORMATION

Agency's Name

EIN Number

Website URL

Facebook URL (@)

Agency Grant Primary Contact	
First Name	Last Name
<input type="text"/>	<input type="text"/>
Title	Email Address
<input type="text"/>	<input type="text"/>

SECTION 1: PROGRAM INFORMATION

(1) Program Name

(2) Brief program purpose statement. (250 Words or Less)

(3) The number of full time & part time staff

(4) The amount requested. (Must be \$5,000 or Less)

(5) Please tell us about the population(s) you serve and within what geographic area. (250 Words or Less)

(6) Select the primary funding area that your program falls under (select only one):

(7) Please tell us about the program you are requesting funding for and how it impact's poverty in Steele County. (1500 Words or Less)

(8) Please share how volunteers were utilized in your programs in 2023. Include how many volunteers you utilized and how many hours they provided for the program you are requesting funding for. (250 Words or Less)

(9) How are you partnering with other organizations to achieve the proposed outcomes in your workplan? (500 Words or Less)

(10) If you received funding last year, how were those funds used? Were there any changes to your proposed workplan? (250 Words or Less)

ALL FIELDS MUST BE COMPLETED FOR YOUR SUBMISSION TO BE APPROVED FOR FUNDING CONSIDERATION.

SECTION 2: ADDITIONAL DOCUMENTS

Complete the Actual Outcome Section of the previously submitted 2023 Form 1: Work Plan and Evaluation that you submitted with your original request for funding. **IMPORTANT:** resubmit the actual form you submitted in 2022. This is your program evaluation!

No file chosen

[Upload requirements](#)

Attach your ALREADY SUBMITTED 2024 "Work Plan & Evaluation" (Form 1) sheet for this program

No file chosen

[Upload requirements](#)

Attach your 2025 "Work Plan & Evaluation" sheet for this program (Form 1)

No file chosen

[Upload requirements](#)

Attach 2025 "Agency Budget and Reserves" Form 2

No file chosen

[Upload requirements](#)

Attach 2023 "Geographic and Demographic Final Report" Form 3 (existing programs)

No file chosen

(existing programs)

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Attach your current 2024 Board of Directors

No file chosen

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Attach 2023 Program Testimonials

No file chosen

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Attach 2023 Year-End Financials. (Year End P & L and Balance Sheet)

No file chosen

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Attach 2025 Signed Agency Correspondence Policy

No file chosen

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Attach 2025 Signed Counterterrorism Compliance Policy

No file chosen

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