

For Office Use Only  
Date rec'd: \_\_/\_\_/\_\_  
Uniqueness/Originality: \_\_  
Neighborhood Engagement: \_\_  
Funding/Budget: \_\_  
Collaboration/Partnership: \_\_

# Green Bay Neighborhoods

## Green Bay Neighborhood Association MiniGrant Application

Please rank priority level if you are submitting multiple requests: \_\_\_\_

**I. Organization Information**

Association Name: \_\_\_\_\_

Mailing Address: *Street:* \_\_\_\_\_ *Zip Code:* \_\_\_\_\_

Contact Information: *Name:* \_\_\_\_\_

*Title:* \_\_\_\_\_

*Email:* \_\_\_\_\_

*Phone:* \_\_\_\_\_

**II. Funds Requested**

Project/Proposal Name: \_\_\_\_\_

Total Project Cost: \_\_\_\_\_

Grant Funds Requested: \_\_\_\_\_

Do not edit "Project Cost" or "Grant Funds Requested" here. These values will update to reflect entries in the Budget Form (pg. 5)

### **III. Narrative**

1. Describe your proposed project or program in detail.

2. How does this project or program advance your Mission?

3. Please describe your association's capacity to successfully complete this project.

4. Describe any partnerships or collaborations that will contribute to the success of the project.

5. What is your project timeline? When will grant funds be needed, if awarded?

6. Has your Association received necessary approval(s) from the appropriate City Departments?  
(Please attach relevant correspondence documenting City approval)

Yes

No

N/A

7. Please provide a listing of your current Board of Directors with titles and email addresses.  
If more space is needed, attach additional names on a separate sheet.  
Place an asterisk (\*) next to the names of Board Members with signatory authority for your checking account.

<b>Board Members</b>	
NAME & TITLE	EMAIL ADDRESS
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	

*(Indicate Check Signers with "\*\*")*



**V. Required Attachments.**

1. Copy of Board Resolution authorizing this project or Minutes of a Meeting clearly documenting Board approval.
2. Your Association's latest Treasurer's Report.
3. Documentation of City Approvals if you answered "Yes" in Section III.6 above.
4. Any additional Board Member Contact Information not included in III.7. above.
5. Any pictures, diagrams, or other information relevant to this request (optional).

**VI. Authorization - This Request is Duly Authorized by Our Association:**

Signature of Neighborhood Association President:

By: \_\_\_\_\_ Date: \_\_\_\_\_

For applications to be considered, they must be complete and contain all of the required attachments listed in section V.

Handwritten applications will not be accepted.

Submit applications via email to [vicki@gbneighborhoods.org](mailto:vicki@gbneighborhoods.org) by the deadline for MiniGrants posted at [gbneighborhoods.org](http://gbneighborhoods.org)