



MINNESOTA BOARD OF FIREFIGHTER TRAINING AND EDUCATION
445 MINNESOTA STREET, SUITE 146
SAINT PAUL, MN 55101
TELEPHONE: 651-201-7257 FAX: 651-215-0525
EMAIL: fire-training.board@state.mn.us
WEBSITE: www.mbfte.org

**Conference, Seminar, Training Class
Symposium, Special Event**

FY 2016 Reimbursement Grant Application

Application Date:

Grant Requested Amount:

Organization/Agency Name:

Address:

City:

State:

Zip:

Contact Person:

Title:

Email:

Phone Number:

Cell Number:

What is the mission or goal of the organization applying for the reimbursement grant?

Who is the target audience of your event?

What will the requested reimbursement grant funds be used for?

How will this reimbursement grant help your organization/agency achieve its goal or mission?

Is the reimbursement grant amount requested by your organization/agency the total amount needed to fund the conference, seminar, training class, symposium or special event?

Yes No

If no, what is the amount needed to complete your project?

Of the reimbursement grant funds requested, would any of it go towards administrative expenses? Yes No

What communities, counties, regions, agencies are served by your organization/agency?

How many individuals or agencies does your organization/agency serve?

How will your organization/agency measure the effectiveness of the reimbursement grant you are applying for?

Additional Comments:

NOTE: This grant is restricted to ONE (1) grant per organization, per fiscal year and a maximum grant amount of \$5,000 awarded per organization.

Applicant Signature:

Printed Name of Applicant:

Date:

You may submit by email to steve.flaherty@state.mn.us

Minnesota Board of Firefighter Training and Education (only)

Date Application Received:
Application Approved:

Received By:
Approved Amount: