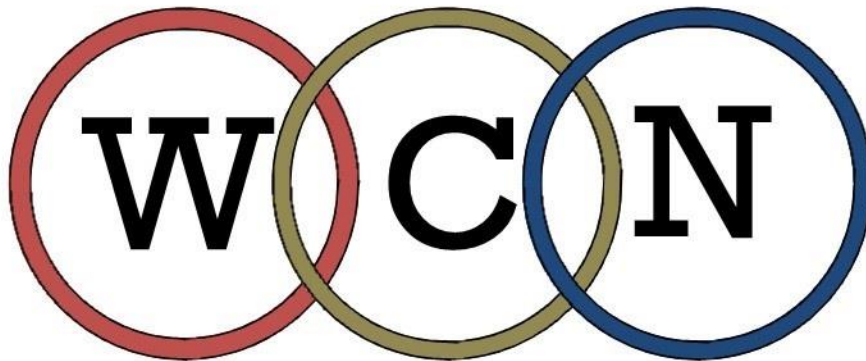


2016



Willapa Community Network

Mini-Grant Application

Please return completed application by close of business:

Friday, December 11th, 2015

Applications may be hand delivered or mailed to:

Alyssa Grams
Willapa Community Network AmeriCorps Member
C/O Willapa Behavioral Health
300 Ocean Ave
Raymond, WA 98577

Or emailed to:

wcn@willapa.net

Willapa Community Network

Our vision is a thriving, connected, community achieved through enhanced leveraging of resources and services in North Pacific County. Our mission is to support an inclusive community network that encourages communication and collaboration among service providers, business, and volunteers, to enhance quality of life in north Pacific County. We also work to encourage networking among local agencies, coalitions, and other volunteers that will result in increased leveraging of resources, increased partnerships and collaboration, and a reduction in duplication of services.

Projects we are looking to fund MUST address or have an outcome related to:

Reducing Intergenerational Poverty

Some examples may include programs or services that promote positive youth development and support families. Projects in the past have addressed:

- Parent Education
- Family Enrichment
- Food Programs
- Literacy
- Community Connections
- Early Childhood Development
- Entrepreneurship and Youth Innovation
- Child Abuse and Neglect Prevention
- Youth Violence Prevention
- Youth Substance Abuse Prevention
- Teen Pregnancy Prevention
- Mental Health Promotion
- Domestic Violence Prevention
- School Dropout Prevention
- Housing and Homelessness

For examples of recent mini-grant awards visit: www.pacificcountyyouth.org
and/or www.wellspringpacific.com/mini-grants

Grant funding is reimbursement-only. Original receipts must be submitted for all expenses.

Typical award amounts range from \$250 to \$1,000 each. Projects must be completed by December 31, 2016. Receipts, invoices, and reports due by January 31, 2017.

Willapa Community Network

2016 Mini-Grant Application

Today's Date: _____ Date of Proposed Project: _____

Organization: _____

Address: _____

City/State/Zip: _____

Contact Person: _____

Phone: _____

E-mail: _____

We are a:

_____ Non-profit group/organization	_____ School-based group
_____ Faith-based group/organization	_____ Local Government
_____ Community-based group/organization	_____ Tribal organization
_____ Health Education Service	_____ Other _____

If the organization is not acting as its own fiscal agent please indicate what organization will be processing the funds.

Organization: _____

Address: _____

City/State/Zip: _____

Contact Person: _____

Phone: _____

E-mail: _____

Mini-Grant Questionnaire

1. **Needs Statement**: Provide an outline of the general needs in the community that your project addresses.
2. **Project Description**: In detail, describe the project. Include a project timeline.
3. How does your project **reduce intergenerational poverty**?
4. What are the **goals and expected outcomes** of the project?

5. **Project Target**:

Who is the project's targeted audience? _____

How many people will be served by the project? _____

6. **Collaboration**: Describe any plans to collaborate with other community partners.
7. You will be expected to **give an oral presentation or a written account** on the completed project.
 - a. Your presentation or written account will be greatly enhanced if a member of the target group is a participant in the reporting. Who will take responsibility for reporting back to the board?

Budget

(Please complete all relevant categories)

BUDGET CATEGORIES	TOTALS
1. Materials & Supplies: <i>Please include quantities and price per item</i>	\$
2. Printing: <i>Please include quantities and price per item</i>	\$
3. Food: <i>Please include quantities and price per item</i>	\$
4. Rental fees: <i>Examples: space, equipment, etc.</i>	\$
5. Travel/Transportation: <i>Estimate travel expenses needed to support the project; using the website below to obtain standard rates for your area.</i> http://www.gsa.gov/portal/category/21283	\$
6. Other Expenses: <i>List any other expenses needed to complete the project. Attach another sheet if necessary. *Please note, wages are not a reimbursable expense.</i>	\$
TOTAL AMOUNT NEEDED FOR PROJECT/SUPPLIES	\$

If we can't provide the full funding, what is the minimum dollar amount you would need from us in order to still run the project?* _____

Please indicate how the project would be affected if funded at this minimum amount:

***Stating a minimum amount will not hurt your chances of receiving full funding.** If we receive a large number of grant requests, we may decide to partially fund as many projects as possible instead of fully funding just a few.

Grant notifications will be announced on or before:

Friday, January 8, 2016

Good Luck!