



NEIGHBORS HELPING NEIGHBORS

# LOWER FLATHEAD VALLEY COMMUNITY FOUNDATION

P.O. Box 255  
Ronan, MT 59864  
406-676-4110

## GRANT APPLICATION INSTRUCTIONS

### **At the top of the page only, please put:**

Date of Submission

Project Start/End Date

Name & Address of Organization

Contact Person & Phone Number

Amount of Request

Title of Grant Request

***Grant applications totaling more than \$3,000 please complete all of the following:***

***Grant applications for less than \$3,000 please complete numbers 1 through 6:***

1. Summary statement specifying amount requested:
2. Specific purpose of the funds requested; what will the funds accomplish?
3. Description of the need for the project in the community.
4. Line item budget for the requested funds, including summary of sources for other funding.
5. Summary of in-kind contributions.
6. Description of the evaluation process; define methods for measuring results.
7. Copy of the latest annual operating budget and balance sheet.
8. Qualifications of key personnel – briefly.
9. Board of Directors names.
10. Evidence of Board approval / board signature, resolution or minutes.
11. History of grants (by title only) made by LFVCF / dates.

### **Approval Process:**

Applications are screened by the Community Foundation Staff to ensure that the application is complete. The grants committee meets four times a year (refer to deadline information). The committee considers each application and determines the specific field of interest and amount (s) to be granted. Foundation staff will notify the applicant about the status of their request within one month of review by the grants committee. For questions call Myrna Gauthier at 406-676-4110.

### **Send Completed Application To:**

Lower Flathead Valley Community Foundation  
P O Box 255  
Ronan MT 59864