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|  | Cane River National Heritage Area  Grant Application |  |  |
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|  | |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | | | | | | | | | | | Date |  | Project Title/ Proposal Name | | | | | | | | | | |  | | | | | |  | |  | | | | | Project Contact | | | | | |  | | Organization Name | | | | | Primary Contact Information | | | | | | | | | | | | |  | | |  | |  | | | |  | |  | | Home Phone | | | | Cell Phone | | | | | | Email Address | | |  | | | | | | | | | | | | | Address | | | | | | | | | | | | |  | | |  | |  | | | |  | |  | | City | | |  | | State. | | | |  | | ZIP Code | | Funding | | | | | | | | | | | | |  | | | | | | | | | | | | | **Applicant Type** (Governmental, Non-Profit, Educational Institution, Commercial, Community Org., Tribal Org., Cultural Heritage Org., Individual) | | | | | | | | | | | | | **Funding Category** (Historic Preservation and Enhancement, Conservation & Collections, Land & Water Conservation, Recreation, Education & Public Learning, Promotion & Marketing) | | | | | | | | | | | | | Funding Amount Requested | | | | | | | Project Time Frame | | | | | | |  |
|  | |  | | --- | | Project Proposal |   **Please provide a brief, 300 words or less, summary of the proposed project.** | |  |

**Please answer the following questions in 3-5 sentences.**

**How will your project benefit the public? Do you expect any social, community, or quality of life impacts as a result of your project?**

**Will your project have a regional or multi-parish impact? If so, please explain.**

**How do you plan to publicize your project/ event and acknowledge the support of Cane River National Heritage Area, Inc. partnership?**

**What previous experience do you or your organization have with managing or completing projects of this nature?**

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| Budget Summary |

Please complete the following budget chart and match summary for your project. Please ensure that all the columns are totaled correctly and that your **match equals or exceeds your request**.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Categories | Request | Cash Match | In-Kind Match | Subtotals | |
| Consultant |  |  |  |  |
| Contract for Services |  |  |  |  |
| Equipment |  |  |  |  |
| Materials & Supplies |  |  |  |  |
| Personnel |  |  |  |  |
| Travel |  |  |  |  |
| Marketing |  |  |  |  |
| Other |  |  |  |  |
| Totals |  |  |  |  |

A 50/50 match is required for all funded projects, this includes the Cash and In-Kind funds.

Grant funds are allocated on a reimbursable basis upon receipt of final invoicing

and a complete Final Report.

**Budget Narrative: Please write a short explanation for the expense funded by the grant.**

**In-Kind Sources: Please list your sources for the In-Kind Match column.**

(volunteer personnel, non-monetary donations, etc.)

**Cash Sources: Please list the sources of your Cash Match column.**

(funds provided by the organization/ individual, monetary donations towards the project, etc.)

**Please list any additional partnerships that are associated with this project.**

I certify the information contained within this application to be accurate and I fully understand the requirements and obligations of the Cane River National Heritage Area, Inc. grant program.

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Signature of Authorizing Official

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| --- | --- |
| CRNHA Office Use Only | |
| **Receipt Date** | **Personnel** |
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