

## 2014 Governor's Conference on Aging

### MINI-GRANT APPLICATION FOR SENIOR PROJECTS

Applications must be received by April 1<sup>st</sup>, 2014.

The purpose of the Mini-Grant Program is to help facilitate up front funding of innovative ideas that will serve senior interests in local communities. Funding for these grants is provided by donations.

The one time only mini-grants range from \$200 to \$1,000. Applications can be received from any governmental agency or 501(C)3 non-profit organization. The community receiving the grant must have a population fewer than 10,000. Photo's of the completed project and accounting for funds received will be required as well as a report to the Governor's Advisory Council on Aging by year end.

Eligible activities include a full range of services needed by Montana's seniors such as training and education, development of support services, creating or enhancing on-going services to meet a specific or unmet need of seniors in the community. They should exhibit collaboration with the aging network, and public/private sector partnerships are encouraged.

Priority ranking of the proposals will be based on the following:

1. Is this a serious unmet need/problem?
2. Is this a creative solution to the need/problem?
3. Is this a wise expenditure of funds?
4. What will happen to the project after the funding is ended?
5. Is it a collaborative proposal?
6. Can the project be copied by other communities?

NOTE: Application needs to have a cover page followed by a narrative which addresses the questions listed below and must be received by April 1, 2014.

Send applications by April 1<sup>st</sup>, 2014 to:

Governor's Conference – Mini Grant  
DPHHS-SLTC  
PO Box 4210  
Helena MT 59604-4210

Or faxed to: 406-444-7743

Or e-mailed to: [crehbein@mt.gov](mailto:crehbein@mt.gov)

For more information please call 1-800-332-2272 or direct 406-444-7788

# MINI-GRANT APPLICATION FORM

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City/ZIP \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_

Email address \_\_\_\_\_

Amount being requested: \_\_\_\_\_

Who is responsible for the project \_\_\_\_\_

Who is the sponsoring organization \_\_\_\_\_

Will someone from the organization be able to attend the conference to receive the award?    Yes    No    If yes, who and what is their contact information?

I verify that the funds from this mini-grant will be used as detailed in our application, if received, and funds granted will be expended by December 31<sup>st</sup>, 2014.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## MINI-GRANT APPLICATION FORM

Organization\_\_\_\_\_

***Note: Applications need to address the following questions***

1. Describe the problem/unmet need in the community and its effect on seniors.
2. Describe how you propose solving this need/problem.
3. Explain how you will collaborate with the aging network, or establish a public/private partnership in addressing this need and any on-going funding needs related to this problem or unmet need.
4. If this is a service or activity that can be duplicated in other communities, please describe how it can be replicated.
5. Provide a detailed budget for the proposed project.