

This grant application will be viewed by all granting entities. One application will allow your proposal to be considered for multiple awards. Please fill out each field as much as possible to be considered for the various grant programs. Refer to the attached criteria to ensure all documentation is included.

**Applications are due by 4:30 pm on August 2, 2021**

By email to extension@countyofdane.com or mail to Dane County Extension 5201 Fen Oak Dr. STE 138 Madison, WI 53718

**2021 Grant Application**

|  |  |  |  |
| --- | --- | --- | --- |
| Project Title |  | Organization  |  |
| Project Timeline  |  | Fiscal Agent if different from organization |  |
| Which would your organization be classified as? Check all that apply | Friends of Dane County ParksMunicipality501(c)3School or School DistrictOther:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you able to provide the match if requested? | Equipment rental or purchaseNoYesIf so, how much?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| What is the main purpose for the grant? Check all that apply | Native Plant RequestEnvironmental/Sustainability Education or InterpretationPark Construction or Restoration ProjectOther:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Volunteerism  |
| Will you accept partial funding of this request? | NoYes | Will the project move forward without this funding? | NoYes |

|  |
| --- |
| **Authorized Project Representative Contact Information** |
| Name |  |
| Title |  |
| Organization Address | Street  |  |
|  |
| State and Zip |  |
| Phone | Work | Cell |
| Email |  |

**Proposal Narrative** (Maximum 1000 words)

**Project Budget Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Name:** | **Project Name:** |  | **Sources of Funding** |
| **ITEM DESCRIPTION** (List **ALL** project components) | **Quantity** | **Unit Cost** | **Total** |  | **Matching &** **In-kind Funds** | **Grant Funds****Requested** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |
|  | **TOTAL****PROJECT****COST** | **TOTAL****MATCHING****FUNDS** | **TOTAL****GRANT****FUNDS****REQUESTED** |

**Tips for a good budget:**

* Be sure to review the grant program requirements carefully
* Sources of matching funds are required for capital grants
* Use county living wage for non-professional volunteer time - $15 per hour
* Provide details (model numbers, quantity, vendors, etc.)
* Two estimates are required for any single item (including contract work) or multiples of a single item with a total value over $250. Bids must be on bidder’s official letterhead. With bids, check for non-profit pricing for items.

**Once grant is approved, no budget changes may be made without prior approval.**

**NATIVE PLANT REQUEST**

Community Group or School Affiliation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Location (approx. address):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many plants\* would you like?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(\*A good rule of thumb is one plant for every 1-1.5 square feet)*

Does this project include a rain garden? 🞎 Yes 🞎 No

Are you interested in educational signage to post at this garden? 🞎 Yes 🞎 No

Check one: 🞎 This will be a new garden 🞎 We are enhancing an existing garden

**Brief description of the project and how the plants will be used? If the plants are part of a larger project in this grant application, describe how they fit into the larger project.**

**Are you working with a professional landscaper or native plant expert to design your garden? If so, who are you working with?**

**Who will maintain the garden after it is planted (watering, weeding, etc.)? Who will maintain the garden long-term?**

**If your project is approved, we will follow up with you about plant selection. By completing this section of the grant application, you are agreeing that if you receive plants you will:**

* Use the plants for the purpose described on the application
* Water and care for the plants during the first few years while their roots are becoming established.
* Provide a short write up and photos to Dane County after the project is complete.