

Are you using a Fiscal Sponsor for this project?

Choose an item.

**CEO, President or Executive Director of Organization**

Prefix: Click or tap here to enter text.

First Name: Click or tap here to enter text.

Direct Phone: Click or tap here to enter text.

Title: Click or tap here to enter text.

Last Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Project Title: Click or tap here to enter text.

Project Start Date: Click or tap here to enter text.

Project End Date: Click or tap here to enter text.

Select the number of years of funding you are requesting and enter the amount per year in the fields provided.

Years of Funding: Choose an item.

Year 1: Click or tap here to enter text.

Year 2: Click or tap here to enter text.

Total Project Budget: Click or tap here to enter text.

Please upload your project budget *(upload in grant portal)*

Please upload your budget narrative *(upload in grant portal)*

*A budget narrative explains the estimated costs by line item or category in the budget with further detail related to your project.*

Total Annual Organization Budget: Click or tap here to enter text.

Please upload your organization budget *(upload in grant portal)*

**Check here to confirm that you have updated your leadership demographics on your organization profile. Please note that your application is considered incomplete if this section of your organization profile is not completed at time of submission.**

Yes

**Please only check boxes where your project meaningfully targets the needs of the selected community**

**Statewide (**Defined as any project extending throughout the state of Minnesota without further defining a specific geography.)

Yes

No

**County(ies) served by this request**

Click or tap here to enter text.

**City(ies) served by this request, if applicable**

Click or tap here to enter text.

**Neighborhoods Served, if applicable**

Click or tap here to enter text.

**Age group served by this request:**

Early Childhood (under 5)

Adults (25-64)

Children (5-12)

Older Adults (65+)

Teens/Young Adults (13-24)

**Tribal Nation served by this request (if applicable):**

Bois Forte

Fond du Lac

Grand Portage

Leech Lake

Lower Sioux

Mille Lacs

Prairie Island

Red Lake

Shakopee Mdewakanton

Upper Sioux

White Earth

Other

**Racial and/or ethnic group served by this request:**

Asian/Asian American/Pacific Islander/Asian

Black/African American/African

Hispanic/Latino/Latina/Latinx

Native American/American Indian/Indigenous

White/Caucasian/ European

Multi-Racial/Multi-Ethnic (2+ races/ethnicities)

Additional ethnicities

Unknown

Decline to state

If you have selected “Other” above, please describe in this field:

Click or tap here to enter text.

**Does your project serve Immigrants and/or Refugees?**

Yes

No

**Sexual Orientation served by this request**

Gay, Lesbian, Bisexual, or other sexual orientations in the LGBTQIA+ Community

Heterosexual or straight

Unknown

Decline to State

**Gender Identity served by this request**

Transgender

Non transgender (cis gender)

Unknown

Decline to state

Provide a 2-3 sentence summary of your request. (Typical response is about 100 words)

Click or tap here to enter text.

1. Describe the opportunities and challenges your application addresses and your proposed solution. (Typical response is about 1,000 words)

Click or tap here to enter text.

1. How was the focus determined and who was involved in that decision-making process? (Typical response is about 500 words)

Click or tap here to enter text.

1. Describe your organization's capacity and relevant expertise. (Typical response is about 500 words)

Click or tap here to enter text.

1. Describe your goals and objectives for this project. (Typical response is about 1,000 words)

Click or tap here to enter text.

1. Describe the specific activities for which you seek funding and who will carry out the activities. (Typical response is about 500 words)

Click or tap here to enter text.

1. How will this project advance racial and health equity? (Typical response is about 500 words)

Click or tap here to enter text.

1. Describe how you will evaluate your work. What impact will you have? How will you measure? Who will be involved? (Typical response is about 500 words)

Click or tap here to enter text.

1. If applicable, describe your strategies for sustaining this effort. (optional)

Click or tap here to enter text.

1. We invite you to provide any additional information here that would be helpful for us as we review your request. (optional)

Click or tap here to enter text.

1. Upload any additional attachments here that would be helpful for us as we review your request. (optional) *(Upload in grant portal)*