



GRANT APPLICATION

Quarterly Application Package

Please complete all sections of the application to ensure accuracy and intent.

Dear Applicant,

The Miller Area Foundation was formed in 1994 through a generous initial contribution of \$125,000 by Jim and Nini Hart. Grants are offered on a quarterly basis to bring the funding source and project timelines closer together. The award periods made are in March, June, September, and December. Generally, applicants must be classified as non-profit, non-government organizations. An organization is eligible only once during a calendar year.

The funds offered by the Miller Area Foundation represent the earnings from a larger investment held in trust by the S.D. Community Foundation. The larger our investments, the more the Miller Area Community Foundation can give back to the community for projects.

Each grant recipient is expected to provide the foundation with a report of how the funds made their program or project a success. This expectation allows the foundation board the opportunity to determine if the foundation's mission is being met or if changes need to be made in the award process.

Please read the following application carefully and complete all sections.

Thank you for applying,

Miller Area Foundation Board Members

Dawn Joy, Sandy Werdel, Dan Coss, Rob Mullaney, Nini Hart, Clayton Werdel, Terry Augspurger, Betty Jo Welch & Tiffany A. Hofer

The mission of the Miller Area Foundation is to receive and administer charitable gifts creating a permanent endowment to assist a wide range of programs to qualified non-profit organizations, institutions or agencies to promote the social and economical well-being of the people of Miller and the surrounding communities.



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to ensure accuracy and intent.

SECTION 2:

GENERAL INFORMATION:

Date of Application: _____ EIN # (if applicable): _____

Name of Organization: _____

Mailing Address: _____

Physical Address: _____

Phone #: _____ Fax #: _____

Website: _____

Contact Name: _____

Contact Phone #: _____ Email address: _____

Organizations Mission: _____

PROJECT INFORMATION:

Project Summary: _____

Amount Requested: _____

Total Project Amount: _____



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Section 3:

(Fill out if your organization received a grant in the past from Miller Area Foundation)

Applicant Organization: _____

Grant Year: _____ **Grant Award Amount:** _____

Number of people served by grant funds: _____

Project Begin Date: _____ **Project End Date:** _____

Funding partners or volunteers: _____

Summary of project:

Do you have any suggestions for the Miller Area Community Foundation to consider?



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GRANT ACCEPTANCE POLICY: All grants made are subject to the terms herein.

Grant Applicant (organization or group): _____

1. **Public Recognition:** The Foundation appreciates the grantee's efforts to publicize the grant and the fund within the Miller Area Foundation that awarded the grant.
2. **Expenditure of Grant Funds:** The funds awarded may be spent only in accordance with the goals and objectives stated and budgeted in the Grant Application you submitted, as approved by the Foundation. The funded project and its budget may not be changed expect with prior written approval of the Foundation.
 - a. Expenses may not be charged against the grant before or after the date of the grant period without prior written approval of the Foundation.
 - b. Equipment or property purchased with grant funds shall be the property of the grantee organization unless the organization should go out of existence. In that case, the ownership of the equipment or property reverts to the Foundation unless ownership is transferred to another nonprofit organization.
3. **Disbursements to Grantee:**
 - a. Grant funds will be disbursed to the grantee upon receipt of signed contract.
 - b. The grantee is responsible for grant funds received and for maintaining adequate supporting records. Separate accounting records must be maintained for these grant funds.
4. **Reversion of Grant Funds:** The grantee will return to the Foundation any funds not spent by the close of the grant period.
5. **Review of Grant Activity:** The grantee will furnish the Foundation with a closing grant evaluation and statement of expenditures.
 - a. Also, the Foundation would appreciate photos and copies of articles published about the grant activity.
6. **Limit of Commitment:** Unless otherwise stipulated in this contract, the Foundation has no obligation to provide other or additional support to the grantee.

Grant Applicant (person responsible): _____

Signature: _____

Date: _____