

Community Investment Fund Mini-Grant Application

Please note: Community Investment Funds are to be used for inclusive projects or programs that help people with disabilities live, learn, work, and/or play in their communities. “Inclusive” means people with disabilities participating together alongside people without disabilities.

Who?

1. Name of project contact person:
2. Name of another project contact person:
3. Organization name:
4. Address (street address, city, state, zip code):
5. Email address:
6. Phone number:
7. Organization’s website (if applicable):
8. Brief description of your organization (number of employees and volunteers, what you do and who you usually serve, etc.) (75 words maximum):

9. How does your organization's mission relate to the proposed activity for people with disabilities? (75 words maximum):

10. What previous experience has your organization had with grants? (No previous experience is necessary.)

What?

1. Project or program title:
2. Who are your intended participants/who will your project serve?
3. How many people with disabilities do you expect to participate?
4. How many people without disabilities do you expect to participate?
5. Amount requested (up to \$2400.00):

Where?

1. Where will the project or program take place? (Please note: locations must be accessible to people with disabilities.)

When?

1. Expected start and end date:

Budget

Please note: The “category” listings in the following section are suggestions. Not all projects or programs will have expenses in every category.

Category	Amount	Description
Staffing	\$	
Supplies/ Materials	\$	
Printing/ Advertising	\$	
Travel and Lodging	\$	
Speaker Stipends	\$	
Scholarships	\$	
Project Evaluation	\$	
Other Project Costs	\$	
Other Project Costs	\$	
Total Requested Budget Amount	\$	

Please submit the completed application by email, mail or fax to:

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Fax: (406) 243-2349