

# *Community Enhancement Grant*

## **INSTRUCTIONS**

### HAF FAVORS GRANT PROJECTS THAT:

- Demonstrate innovation
- Promote original, creative ideas
- Focus on the overall impact on the community
- Have measurable indicators of success

Proposals will be accepted for new and innovative projects that enhance the quality of life in the Holmen area. Special emphasis is given to grant requests that include social services, health, arts, leadership, recreation, conservation, and preservation. Grant money may not be used for operating expenses such as for payment of staff.

To be considered for the Community Enhancement Grant, you must complete both the *Application Cover Sheet* and the *Proposal Outline* **including Section 2. Budget.**

### WHO CAN APPLY?

Holmen area residents are encouraged to apply for grants from the Holmen Area Foundation. Applications may be submitted by any Holmen area community member.

### TIMELINE:

Application deadlines are February 1 and July 1. The HAF Grants Committee may schedule an interview with you to discuss the application. You will be notified whether a grant has been awarded or denied approximately six weeks after the application deadline. Final Report, expenses and receipts must be submitted within 12 months of fund allocation.

### GUIDELINES & RESTRICTIONS:

- Grant award amounts vary. Larger grants are generally awarded for projects that involve multiple entities. Indicate if the request must be funded in full to implement.
- Grant recipients are required to carefully track expenses and save receipts for use of grant funds. A form will be provided at the time of the award. Unused grant funding (\$20 or more) must be returned to HAF.
- Grant recipients are required to submit a Final Report to help HAF ensure effective grant making and data collection.
- All applicants must have completed Final Reports from previous grant projects before any additional funding is approved. Failure to submit Final Report within 12 months of fund allocation may adversely affect future funding.
- HAF typically provides seed money for creative projects and should not be considered a resource for long-term, ongoing funding.
- HAF does not reimburse for previously incurred expenses.
- HAF does not provide funding for salaries.

### TO APPLY FOR A GRANT:

1. **COMPLETE** all sections of the HAF Community Enhancement Grant *Application Cover Sheet* **and** *Proposal Outline*. Please type the narrative portion of the application.
2. **SIGN** the application.
3. **SUBMIT** the application via email (.pdf format) to [Grants@HolmenAreaFoundation.org](mailto:Grants@HolmenAreaFoundation.org) or hard copy to P.O. Box 432, Holmen, WI 54636.

**Application deadlines are February 1 and July 1.** Please be advised you will be notified whether a grant has been awarded or denied **approximately six weeks** after the application deadline.



# APPLICATION COVER SHEET

## *Community Enhancement Grant*

Please check the areas that best describe the type of grant being applied for:

ARTS                       CIVIC                       CONSERVATION                       HEALTH  
 LEADERSHIP                       RECREATION                       SOCIAL SERVICES                       OTHER

Amount Requested: \$       Total Project Budget \$       Partial Funding? Yes  No

Name of Organization Submitting Request \_\_\_\_\_

Contact Name: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Project Title: \_\_\_\_\_

Population to be Served by Project: \_\_\_\_\_

Duration of Project From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature                      Print Name                      Date

\_\_\_\_\_  
Applicant Signature (if more than one applicant)                      Print Name                      Date

**\*\*If a school in the Holmen School District is part of this application, ensure the following signatures are obtained\*\***

I am aware of this grant application and confirm that there is no other funding available for the applicant. Furthermore, I verify that this project supports district, school, and curricular goals.

Curriculum Supervisor Signature	Print Name	Date
Building Principal Signature	Print Name	Date
Technology Department Signature (if needed)	Print Name	Date

**For HAF Office Use Only**

Grants Committee/Board Meeting Dates: \_\_\_\_\_ Total Amount Approved: \_\_\_\_\_

Pay Grant From: \_\_\_\_\_ Final Report Due Date: \_\_\_\_\_ Grant Number: \_\_\_\_\_

Mail or Email Completed Application to:  
 Holmen Area Foundation | P.O. Box 432 | Holmen, WI 54636 | [Grants@HolmenAreaFoundation.org](mailto:Grants@HolmenAreaFoundation.org)



# PROPOSAL OUTLINE

## *Community Enhancement Grant*

Applicants should use this outline format to present their case clearly and concisely. Applicants must address **all** sections and topics for an application to be considered. Incomplete applications will be returned to the applicant and not be considered for funding.

1. **PROJECT SUMMARY:** Briefly summarize the proposed project. **Do not exceed one paragraph.** Identify the following:
  - a. the need being addressed
  - b. the project’s objectives
  - c. the proposed strategy for achieving the objectives

**SUMMARY:**

  
  
  
  
  
  
  
  
  
  

2. **BUDGET:** Detail your budget request using the format below. HAF does not generally fund transportation costs except for delivery of materials.

Materials/Equipment/Services	Quantity	Supplier	Amount
_____	_____	_____	\$
_____	_____	_____	\$
_____	_____	_____	\$
<b>TOTAL:</b>			\$

If HAF is not the only source of revenue for this project, please list the other sources:

Sources of Revenue	Proposed/Pending Amount	Approved/Received Amount
_____	\$	\$
_____	\$	\$
_____	\$	\$
<b>TOTAL:</b>		\$



**PROPOSAL OUTLINE**  
*Community Enhancement Grant*

3. **PROJECT NARRATIVE:** Provide a clear, concise description of your project. **Do not exceed two pages.** Include the following:
- a. Describe the special need or problem the proposals project addresses.
  - b. Explain how the proposed project is particularly innovative/unique to the Holmen community.
  - c. Describe the objectives of the proposed project using:
    - i. measurable terms;
    - ii. methods used to implement the objectives;
    - iii. materials that will be needed; and
    - iv. a timeline for implementation.
  - d. Identify the following:
    - i. the number of individuals affected by this project; and
    - ii. how that information was determined.
  - e. Detail how you will determine
    - i. whether your objectives have been achieved;
    - ii. whether your project is successful; and
    - iii. the potential long-range benefits.

**NARRATIVE:**