

NORTHWEST MINNESOTA FOUNDATION
PROPOSAL FOR FUNDING FROM COMMUNITY & COMPONENT FUNDS

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ORGANIZATION INFORMATION

Applicant organization _____

Address _____

City _____ State _____ Zip _____

Contact person/title _____

Telephone # _____ Fax # _____ E-mail address _____

IRS tax exempt status (check one) Public 501(c)(3) Federal I.D. number _____

Other (specify) _____

FINANCIAL INFORMATION

Total project cost \$ _____ Amount requested \$ _____

Grant Request from: **Hewitt Family Charitable Fund**

Other funding sources to which you are applying for this project:

<u>SOURCE</u>	<u>REQUESTED AMOUNT</u>	<u>COMMITTED OR PENDING</u>	<u>DATE OF COMMITMENT</u>
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PROJECT INFORMATION

Project title _____

Project duration (list beginning and end dates) _____

Brief summary of your request _____

Geographic area to be served by project _____

EXECUTIVE DIRECTOR, BOARD CHAIR or COMMITTEE CHAIR

Signature

Bemidji, MN 56601
Phone: 800-659-7859

Or E-mail: peggyc@nwmf.org

The NMF is committed to fairness, objectivity and non-discrimination in its funding policies
Revised 6/3/08