Community Grant Program





Application Deadline: May 3, 2024, 5:00 p.m. (Applications may be submitted beginning April 1, 2024.)

Instructions: Complete this form and submit by the application due date using one of the following methods:

Email: info@zeelandbpw.com - include "Community Grant Program" in the subject line **Mail or drop-off:** 350 E. Washington Avenue, Zeeland MI 49464 Attn: Community Grant Program

Questions: 616-772-6212

| I. | Basic Information |
|----|---|
| | Project Title: |
| | Project Description (Please write a one paragraph description summary.): |
| | |
| | |
| | |
| | Anticipated Benefit to the Community: |
| | Anticipated benefit to the community. |
| | |
| | |
| | |
| | Description of the equipment, hardware, materials, processes, systems to be used to complete the project: |
| | |

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| II. | Contact Information |
|------|---|
| | Organization name: |
| | Organization address: |
| | Organization phone: |
| | Project contact person: Title: |
| | Project contact person address (if different from above): |
| | Project contact person email: |
| | Project contact person phone: |
| III. | Project Term |
| | Proposed start date: |
| | Proposed completion date: |
| IV. | Project Funding |
| | Amount of grant funding requested: |
| | The total annual available funding amount is \$25,000 (subject to change). This amount may be split among multiple eligible projects. |
| | Other funding sources: |
| | Please itemize the other sources or types of funding including contributions from other |

Please itemize the other sources or types of funding including contributions from other grants, private sources, monetary and/or in-kind. Indicate if the funding sources are unconfirmed. Write "N/A" if there are no other sources/types of funding for this project.

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| Signature of Applicant Date Signed | |
|------------------------------------|--|
| By signir knowled | ng below, I certify all information contained herein is true and accurate to the best of my lge. |
| VI. | Other If selected to receive funding, a report shall be submitted at the conclusion of the project. |
| V. | Support Documents Please include any further relevant documentation you wish to provide the grant application reviewers (e.g. photographs, project designs, marketing materials, letters of support, etc.). |
| | What contingencies have been planned for any shortfalls in funding? |
| | Itemized total budget: You may include a PDF or Excel document OR respond in the space provided. Please be sure to itemize all equipment and estimated costs as well as labor costs broken down by hours necessary to complete the project. Budget information should be as detailed as possible. Please indicate which expenses will be covered by other funding sources, such as in-kind labor expenses contributed by other project participants. |
| | Total project budget should match the itemized total budget amount requested later in this application. It should also be equivalent to the sum of the previous two questions. |
| | Total project budget: |