

**Federation of North Carolina historical societies**

**Mini-Grant Application**

**Overview**

Federation of North Carolina Historical Societies’ mini-grants provide funds (up to $1,500) to member organizations to complete local history projects, such as exhibitions, special programs, or collections preservation.

Recipient organizations must complete projects within the calendar year. Funds will be released in advance of the project and recipients will provide a report with expense documentation upon completion. Organizations that do not provide expense documentation when the project is complete will not be considered for future grants.

Applicant organizations must be a member of the Federation of North Carolina Historical Societies. More information on membership can be found [here](https://www.ncdcr.gov/about/history/fnchs).

If you have questions about this application or the mini-grant program, please contact the Federation of North Carolina Historical Societies by emailing Adrienne Berney.

**Instructions**

Please fill out the entire form, including attaching any required documentation. Missing information or incomplete answers may cause the application to be considered incomplete and therefore void.

Applications are accepted in electronic format. Submit the entire application, including attachments, to Adrienne Berney by **January 31 at 5 p.m.** If submitting by email is an obstacle for your organization, please call 919-814-6863 to discuss an alternate format for submission.

**Application**

Applicant organization: Click or tap here to enter text.

Title of mini-grant project: Click or tap here to enter text.

Total mini-grant request (maximum $1,500): Click or tap here to enter text.

Application for: [ ]  Exhibition development

[ ]  Document collection preservation

[ ]  Artifact collections preservation

[ ]  Interpretive programs or other products

Project pitch: (Please describe your project in one to two sentences.)

Click or tap here to enter text.

In 500 words or less, please provide a detailed description of your project. Be sure to include the following in your description:

1. Project location
2. The need for the project
3. The goals for the project
4. How the project will be implemented

Click or tap here to enter text.

Justification of financial need (Explain how the mini-grant would help your organization accomplish a project it otherwise could not):

Click or tap here to enter text.

Partner organizations involved (if any):

1. Click or tap here to enter text.

2. Click or tap here to enter text.

3. Click or tap here to enter text.

4. Click or tap here to enter text.

5. Click or tap here to enter text.

How many months will the project take to complete? (Note: the project must be completed within the calendar year): Click or tap here to enter text.

Proposed start date: Click or tap here to enter text.

Applicant organization’s Federal Employer Identification Number (FEIN): Click or tap here to enter text.

Project Manager: Click or tap here to enter text.

Title: Click or tap here to enter text.

Street Address: Click or tap here to enter text.

City: Click or tap here to enter text.

State: Click or tap here to enter text.

Zip: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Email Address: Click or tap here to enter text.

Applicant Organization’s mission and/or vision statements:

Click or tap here to enter text.

**PROJECT COST**

Please provide a detailed project budget using the following table. You may add rows as needed. For projects that involve purchasing supplies or equipment, include each item, quantity, unit cost, shipping and handling charges, and the name of the vendor in the Item Description column.

\*If applicable, list the source and amount of any additional funds needed to complete the project, whether pending or already secured. If funds are pending from another grant organization, indicate when you expect to be notified of the award.

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| Item Description | Item Cost/Value | Amount Requested | Additional Funds\* | Source of Additional Funds (organization)\* |
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| TOTAL |  |  |  |  |

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| --- | --- |
| Total Amount Requested | Click or tap here to enter text. |
| Total Additional Funds\* | Click or tap here to enter text. |
| Total Project Cost (Total Request + Total Additional Funds) | Click or tap here to enter text. |

**ADDITIONAL QUESTIONS**

How will your project benefit your local community (e.g., economic, social, quality-of-life effects)?

Click or tap here to enter text.

Will your project have results beyond the local community? If so, please describe.

Click or tap here to enter text.

Please provide a timetable for your project with target dates for major project elements.

Click or tap here to enter text.

Please describe the management and staffing plan for your project.

Click or tap here to enter text.

Please explain the role and contribution of each listed partner organization involved in your project, if applicable.

Click or tap here to enter text.

What happens after the mini-grant project is completed? Will your project be sustained? If so, how do you plan to sustain it?

Click or tap here to enter text.

How do you plan to evaluate success of the project?

Click or tap here to enter text.

How do you plan to publicize the project?

Click or tap here to enter text.

The application must be signed by two representatives of the applicant organization. At least one representative must serve on the governing body of the organization.

**Statement of Assurances and Integrity**

The information provided in this application and supporting materials is accurate and true. By signing below, we affirm that we have the authority to act on behalf of the organization applying for this Federation of North Carolina Historical Societies mini-grant.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: Click or tap here to enter text.

Role: Click or tap here to enter text.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: Click or tap here to enter text.

Role: Click or tap here to enter text.

**Other Required Documentation to Include with Your Application**

Please submit the following with your application:

1. Documentation of the qualifications of the project manager and other key professional project personnel, including contractors (if known at the time of application) and consulting experts. Short bios and/or resumes are preferred.
2. Documentation of any additional funding from the applicant organization or other sources to complete the project, if applicable. If matching funds are pending (e.g., from another grant application), please indicate this and let us know when you expect the match to be confirmed.
3. If you have listed other institutions in the Partner Organizations Involved section of the application, please provide letters of support from these collaborating organizations.