



SCHOOL OF PUBLIC HEALTH

MARYLAND INSTITUTE FOR APPLIED ENVIRONMENTAL HEALTH

MATCH Mini-Grant Application

1. Organization Information

Name of organization:

Email of organization, Executive Director/President or lead staff person

Telephone of organization, Executive Director/President or lead staff person:

Mailing address of organization:

Physical address of organization if different from mailing address:

Website (if relevant):

Facebook Page:

2. Contact Information

Please provide the names of two individuals in your organization whom we can contact if necessary – preferably the Executive Director/President of the group and the lead staff person who is completing this application

1. Name of Contact: _____

Position / Title of Contact _____

Email of Contact: _____

Telephone Numbers of Contact: Business _____ Cell _____

2. Name of Contact: _____

Position / Title of Contact _____

Email of Contact: _____

Telephone Numbers of Contact: Business _____ Cell _____

3. About your group / organization

a) In 250 words or less please briefly describe your group/organization’s purpose, history, and accomplishments.

b) When was your group/organization formed – month and year?

c) Has your organization been operating continuously since it was formed ?

d) If your group / organization is new, is this the first project it is undertaking for which you are seeking external grant funds?

e) Please share your group/organization's most recent annual budget.

f) Does your group/organization have 501(c)(3) status? (**Note:** Your organization is **NOT** required to have this status to receive this funding.) If your 501(c)(3) application is pending, please state that.

g) If your group/organization has a presence on the web (social media, blogs, etc), please list the URLs.

h) Please list two references that your group/organization has worked with closely in the past.

i) Does your organization have a stated mission which has been agreed upon by your board of directors, community advisory board or leadership team? If so, what is it?

4. Project Description (2-3 pages double spaced)

a. Describe the goals and objectives of your project.

b. What need(s) in your community will this project address?

c. How will this money help create change in your community? (i.e., Describe the ways your project will improve the life of the community and its residents and if the problem / hazard you are addressing is mitigated or eliminated altogether.)

d. How will you measure the success of this project? (i.e., Will you be using surveys, interviews, focus groups, quantitative data or a combination of different methods?)

e. Provide a timeline that includes descriptions of the actions you will carry out/ execute during each month of the project and the "deliverables" / products that you will create.

f. Provide a budget and budget justification for your project. Include **Only** expenses directly related to your project. (The budget **should** include salaries and wages of personnel, fringe benefits, materials and supplies, food,

communication costs, print and media costs and any other expense that will be directly related to carry out your project. Items such as entertainment expenses, lobbying expenses, and construction **should NOT** be included in the budget.)

g. Please let us know whether this MATCH grant is the only external funding you will have available for this project. If not, what other organizations do you expect funding from?