GRANT APPLICATION

DATE:					
PART 1 – INFORMATION ABOUT	THE APPLICANT				
Organization / Entity:					
Address:					
City:		Zip:			
Contact Person:					
1. Is the applicant currently a nonpro- Service? [] Yes [] No					
Describe the applicant's purposes and activities in general:					
2. Have funds been requested/funde so, furnish the following:	ed from other sources	for this or a related project? If			
Amount(s) previously requested:					
Source of request:					
Date of request:					
Date & Amount Received:					
3. Has the applicant previously recei project? If so, state amount(s) rece	ived funds from this F ived and year of rece	oundation for this or any other ipt			

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PART 2 – DESCRIPTION OF FUNDING REQUEST (Attach separate sheets if necessary)

Total Amount of Project:

Total Amount Requested From Deuel County Visitors Committee:

4. Provide a description of the funding request including the intended result and, if applicable, how it will be maintained: *(supporting documentation appreciated)*

5. If your project is ongoing, what are your plans to secure funding in the future?

6. Explain how Deuel County will benefit from this project in bringing more tourism in to our county?

7. Is there anything else the Visitors Board should consider in reviewing your request? If so, please elaborate.

I HEREBY CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE ABOVE INFORMATION IS TRUE AND CORRECT AND THE APPLICANT ORGANIZATION HAS AUTHORIZED ME TO MAKE THIS APPLICATION TO THIS COMMITTEE. THE UNDERSIGNED ALSO ACKNOWLEDGES THAT THE DEUEL COUNTY VISITORS COMMITTEE RESERVES THE RIGHT TO REJECT THE FUNDING OF ANY GRANT APPLICATION IN WHOLE OR IN PART.

Name:		
Date:		
Title:		
FOR USE BY COMMITTEE C	ONLY	
Interview with applicant [] Yes	[] No
Interview with applicant [Comments:	-	[] No

Final Disposition:		Funded	Not Funded
Date:			
Signatures of Approval:	1.		
	2.		
	3.		
	4.		