



Military Spouses' Association of 29 Palms 2020 Community Enrichment Grant Application

The Military Spouses' Association - 29 Palms is pleased to provide Community Enrichment Grants to non-profit organizations that benefit military members and/or their families. Organizations must demonstrate a non-discrimination policy regarding staff, employment, governing board, and service delivery on the basis of race, religion, gender, sexual orientation, gender identity, age, disability, or national origin.

GRANT APPLICATIONS DUE: MARCH 1, 2020

APPLICATION REQUIREMENTS

- Complete **all** portions of the application. Blank fields could result in disqualification of the application.
- You may provide **no more than** 2 pages of supporting documentation (e.g., letter of support, news article).
- Grant applications emailed after midnight PST March 1, 2020 will **not** be considered.

SUBMISSION

Submit application to msa29grants@gmail.com by midnight PST March 1, 2020.

You will receive an email confirmation once we receive your application. If you do not receive confirmation within 2 business days, please email us to check in.

QUESTIONS

Any additional questions may be directed to the Grant Chairperson at msa29grants@gmail.com



ORGANIZATION INFORMATION					
Organization Name					
Organization Type	<input type="checkbox"/> Art Services <input type="checkbox"/> Community Services <input type="checkbox"/> Military Services		<input type="checkbox"/> Youth Services/Sports/Activities <input type="checkbox"/> Education <input type="checkbox"/> Other: _____		
Number of Staff			Number of Participants		
Percentage of Military Participants	<10%	11-20%	21-30%	31-40%	41-50%
	51-60%	61-70%	71-80%	81-90%	91-100%
	Share how you calculated this percentage:				
Website (if applicable)					
Address					
Previous MSA (OSC) Grant Recipient	Yes	No			

CONTACT INFORMATION	
Point of Contact	
E-Mail Address	
Phone Number	
If awarded a grant: Make check payable to: _____ Mail check to: _____	

I certify that the grant money we may receive will be used for the purpose as indicated in this request. Should we receive funding, I also agree to post the Military Spouses' Association logo as a sponsor on the organization website. In place of your signature, please type your full legal name:

 Signature

 Date



GRANT REQUEST SUMMARY

Organization Mission Statement	
Amount Requested	\$
Request Summary (Summarize grant project in 2-3 sentences)	

PROJECT PURPOSE

1. How will this grant help address a challenge/problem faced by your organization?

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2. Which members of our community will the grant-funded activity/program serve?

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3. If the military community is not the primary audience for this project, please explain how it is relevant to military members and/or their families.

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IMPACT

List five (5) ways your organization impacts the local military community *(each no more than 100 words)*.

FINANCIAL

Provide an itemized list of the items/activities that the grant will fund:

Item	Description	Price Per Item	Number of Items	Total
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
			Total Request	\$

List Other Sources of Funding That Are Available to Your Organization

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