CROW WING POWER COMMUNITY TRUST PO BOX 507 BRAINERD, MN 56401

218-829-2827 | 800-648-9401 | INFO@CWPOWER.COM

IMPACT GRANT APPLICATION

The purpose of the Impact Grant will be to give a boost to a unique project/program, organization or community to ensure its success.

Each year, at their January meeting, the Community Trust Board reviews applications for an Impact Grant of up to \$20,000. Applicants must demonstrate that this one-time grant will significantly impact their project, organization, or community. Organizations should have a history of successful outcomes, and funding is not awarded for ongoing operational costs. After reviewing applications, the Trustees will invite the top 3-4 organizations to give a 15-minute presentation at the April meeting, where final grant decisions will be made.

Name of Organization	on:		_ Date:		
Address:					
Is Organization:	☐For Profit	■Non-Profit	☐ 501(c)3- Tax Exempt		
The information contained in this application is for the purpose of obtaining funding from					
the Crow Wing Power Community Trust on behalf of the undersigned. We understand that					
the information is confidential, for the Trustees review only. The information provided is					
true and complete.					
Signature (title:)					

Required: Please include Previous year audited financial statement, current year financials (profit & loss), and Impact Project Budget Expense and Revenue.



IMPACT GRANT NARRATIVE

Describe the specific project/program you are proposing and what the grant will support: (250 words or less)
Describe the outcome/impact you anticipate achieving through the funded project or program, including how it will serve the community and how the community will be better as a result: (250 words or less)
OPERATION UP

xplain how you will fund and sustain this project/program beyond this g	rant? (250 words or less)
there any additional information you would like to share with the selecupport your application? (250 words or less)	tion committee to
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