



Iosco County Community Foundation
Mini-Grant Application
Grant Deadline: May 1

Legal name of organization applying: _____

Executive Director: _____ Phone: _____
(superintendent or principal if for a school)

Project contact person and title: _____

Primary address for correspondence: _____

City/State/Zip: _____ Phone: _____

Email: _____ Fax: _____

Title and date of program/project: _____

Amount requested (not to exceed \$300): _____

Program description: Describe the project giving a brief overview of how it will be carried out, who will benefit from it, and any other general information to show how the grant funds will be utilized.

Applicant organization: Briefly describe the applicant organization.

