



PATAPSCO VALLEY HERITAGE AREA MINI-GRANT CHECKLIST

Patapsco Heritage Greenway is happy to discuss your application before you submit. Questions? Please email Kyla Cools at heritage@patapsco.org or call at 410.696.1328 x5.

APPLICATION IS DUE October 15, 2024

- Application Cover Sheet (page 2 of this application) with signature of an individual authorized to apply for grants.
- Project narrative
- Proof of non-profit status (IRS letter indicating 501 (c) designation) or an official document identifying the organization as a unit of a county or municipal government
- Federal ID number
- Project Budget detail
- Board-approved mission statement
- Letters of Support from any organizations partnering on this project or 1 Letter of Support if there are no partnering organizations
- Most recent organizational budget

This may be submitted electronically or in hard copy. There may be instances where a follow-up request will be made to provide related images or supplemental materials.

The Patapsco Valley Heritage Area Mini-Grant Program is made available through support from the Maryland Heritage Areas Authority.

PATAPSCO VALLEY HERITAGE AREA
MINI-GRANT CHECKLIST
Patapsco Valley Heritage Area
Mini-Grant Application Cover Sheet

Date:

Title of Project:

Name of Organization:

Mission Statement of Organization:

Web site address:

Mailing address:

Telephone:

E-mail:

Federal ID number:

Contact person:

Project summary (50 words or less):

Amount of grant request	\$ _____
Amount of cash match	\$ _____
Amount of in-kind match	\$ _____
TOTAL BUDGET	\$ _____

Complete the form provided with this application to show a detailed total budget for the project, and the source(s) of cash and in-kind matching funds. *Prior to 2021 mini-grant projects required a 1:1 match with 75% of the match in cash. **For FY25, the 1:1 match remains, but the match can be any combination of cash and in-kind contributions.** Patapsco Heritage Greenway believes this flexibility is important in providing greater access for smaller organizations.*

Refer to mini-grant guidelines in completing this application and use the checklist provided to assure that all components of the application, including supplemental documents, are included with this application.

Applicant signature (name, title, date): _____

Signatory should be the Executive Director, Chairman of the Board, or someone authorized by the governing authority to apply for grants on behalf of the organization.

Project Narrative: *Please use additional sheets to answer the following questions. Successful proposals will answer the questions fully, yet succinctly. Narrative should be five pages or less.*

1. Describe your project in detail and the project/activities the grant would support.
2. What are the deliverables of the project?
3. How does the proposed project fit into your organization’s strategic plan, long term plan, or overall goals?
4. How is the project consistent with interpretive themes and/or suggested programs, projects, and activities in the [PVHA’s Management Plan](#) and/or our [five year strategic plan](#)?
5. How will the project enhance or increase the heritage area experience for visitors and residents? Will resources be created, improved, preserved, or conserved? Explain.
6. Describe your organization’s ability to initiate, administer and complete the project within the proposed timeline.
7. Who are the key personnel and what are their qualifications?
8. Is it critical that the project be accomplished within a limited timeframe or does the project present a time-limited special opportunity?

TIMELINE

Activity	Anticipated Completion Date

PVHA MINI-GRANT BUDGET

Note, this form must be used, and the basis for cost estimates must be described in the budget detail. Details should be clear and evident as to how each line item relates to the project's scope of work.

LINE ITEMS	MINI-GRANT FUND	CASH MATCH	IN-KIND MATCH	TOTAL

Identify source(s) of matching funds and in-kind contributions. If more than one organization is providing support, identify each organization and the kind and amount of support.

Donor:
 Source:
 Cash or in-kind: ____ cash ____ in-kind
 Amount:
 Date Available:
 Is this funding already committed?

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 Source:
 Cash or in-kind: ____ cash ____ in-kind
 Amount:
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