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c/o Delaware River Greenway Partnership , PO Box 15, Stockton, NJ 08559 [www.lowerdelawarewildandscenic.org](http://www.lowerdelawarewildandscenic.org/)  and [www.facebook.com/lowerdelawarewildandscenic.org](http://www.facebook.com/lowerdelawarewildandscenic.org)

Mini-Grant Email Address: ldwsgrants@delawarerivergp.org

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**Lower Delaware Wild & Scenic River 2021 Mini-Grant Application (Due Monday, March 29, 2021 at 5:00 PM.)**

# **Project Name:**

1. **Funding Request: $**
2. **Name of Entity/Organization:**
3. **501(c)(3)?** Yes No Federal Tax EIN # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If a501(c)(3) and if a registered charity, provide your NJ and/or PA charities number(s):

# **Name of Primary Contact and Title:**

*(Indicate if a volunteer or staff member.)*

1. **E-mail Address:**
2. **Telephone:**

*(Indicate work or cell. Please consider providing cell in addition to a work number.)*

1. **Mailing Address:**
2. **Project/Program Description:**

*(Summary of proposed work and goal(s) of the project in 300 words or less).*

1. **Project Partners:**

*(Describe their role and funding, access and/or in-kind services provided.)*

1. **List, and explain the status, of any permits or permissions required to undertake the project:**

# **Project Products or Deliverables:**

1. **How will project be evaluated?**
2. **Project Narrative:**

*(\* Provide a brief explanation to demonstrate how the project will meet the funding criteria and support the goals of the Lower Delaware Wild & Scenic program.*

*\* In order, address the nine “review criteria” provided in the grant summary. Label replies to correspond with the criteria numbers and titles.*

*\* Describe how relevant Outstandingly Remarkable Values (scenic, recreational, geologic, fish and wildlife, historic, cultural, etc.) are directly benefited by the project.*

*\* Summarize expertise and experience in completing projects similar to that proposed for funding. Submit up to 2-pages of a written description.*

*\* Include photos, maps and other attachments as needed.)*

1. **Project Budget:** Budget items will vary. Below are suggestions for your budget, not requirements. List other budget expenses in the blank areas or use your own form.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Sub-Total | Wild &Scenic Funds Requested | \*OtherSources of Funds or In- Kind Support |
|  Contractor Services:*(Approx. hours @ $ /hour including overhead expenses)* |  |  |  |
| Travel:*(Approx. miles @ $0.575/mile)* |  |  |  |
| Project Expenses:*(including costs, quantities and description of expense)* |  |  |  |
|  Other Expenses: |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | TOTAL: |  |  |  |

1. **Project Timeline:** Projects must be completed by September 30, 2021 with the submission of a final report and invoice due October 31, 2021.

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| --- | --- | --- |
| Task Description and Timeline |  |  |
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1. **\*Project Match:** If you have a funding match to your request, please attach a letter describing and verifying the match. A match is not required.
2. **Photos/Maps/Other Attachments:** Supplemental materials are included in the 8 page limit.