

NONPROFIT GRANT APPLICATION FALL 2023

Instructions

- Read the introductory letter so you will understand the awards process and eligibility requirements.
- Grant awards of \$400.00 and 1 flat of plants (32 plants) from our Fall 2023 plant sale will be awarded.
- Complete all sections of the Grant Application Form. These questions are designed to get members to think about and plan for all aspects of the project, the application is evaluated in its entirety.
- After completing this form, attach it to an e-mail message addressed to loesshillswildones@gmail.com
 noting "Grant Application" in the subject line. Or print out a blank copy of the application, fill in by hand and
 mail to LHWO Grant Committee, 3301 Walden Ave., Sioux City, IA 51106.
- If you have any questions or need further information, please send an email to loesshillswildones@gmail.com and include the word "Grant" in the subject line.

Name of Contact Person:						
Name Nonprofit Group:						
E-mail Address:						
Project Location:						
Project Description						
Please answer the following questions in one or two sentences:						
What are the short- and long-term goals of the project?						
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Tow	what extent will the project achieve one or more of the following objectives:					
C	Restore or develop the native plant community.					
C	Provide habitat for native wildlife.					
(Educate others about the beauty and significance of native ecosystems.					
Wha	at groups and organizations will be involved in developing and maintaining this project? What are					
the a	the ages of students or children involved? (If applicable)					
Who	o owns the project site? Describe their commitment to the project.					
	o anno the project ofter Describe their communicate to the project.					
Wha	at other funding will be used for developing and for maintaining this project?					

)	How will long-term maintenance be assured?					
•	Are there any invasive species on or near the site? If so, how do you plan to address them?					
•	Describe the Project Location: What is the soil/ground like? How much sun does it get (hours/day, morning only, all day, etc.)? How moist does the soil get/remain after rain? What's the approximate dimensions?					
	Please attach a photo and/or drawing or two of the project site. Files are restricted to 1 MB. (PDF or various image file types, 5 images max)					

•	Please include a preliminary list of species you plan to plant. List scientific and common names,					
	numbers of plants, and an estimate of the cost. (Estimate of 1 plant per square foot to get total					
	numbers.)					
•	How did you choose the plants for this site? Did you have assistance?					
	What is your planned timetable, including planting date(s)?					
	What is your planned innetable, melading planting date(s):					
•	Have you raised other funds for this project? Are other organizations contributing, and will they be					
	listed as co-sponsors?					

 What will the site be used 	What will the site be used for besides supporting wildlife and pollinators? (i.e., Meetings, organization						
activities, public use)	activities, public use)						
Contact Information for Person w	no will be responsible for projec	t upkeep:					
Street Address:							
City:		State:	Zip:				
Phone:	Email:						
	Agreement						
disseminate its underlying cond I agree to acknowledge this fur A representative of the Chapte garden if desired. I will display the provided Loese I will submit photos of the gard I will provide within one year of brief description of how the play Plantings are typically done in sinstallation, especially for sprin The Chapter and sponsors and,	iding source in any project public r will periodically observe your g s Hills Wild Ones sign in the wild en to the Chapter as able. If the date of the award, a detailed anting process went, and where the spring or fall. School gardens must	city or printed ma arden. We offer to lower garden. and listing of how to the project stands at arrange for mai	terials. o mentor you and your new he grant funds were used, a s after a year. intenance and watering after assume no responsibility or				
agree to these terms and condition	ns:						
Project Coordinator Name:							
Phone:	Email:						