



COMMUNITY GRANT APPLICATION

Fill in all sections of the Community Grant Application. Any missing information may result in your application being disqualified. For clarification on the Community Grant Application Sections I-VII, refer to Application Guidelines.

SECTION I. APPLICANT INFORMATION

1. Title of Project: _____	
2. Name of Applicant/Organization: _____	
3. Type of Grant: ☐ Planning ☐ Regular	
4. ☐ Organization ☐ Unincorporated Group ☐ Individual	
5. UEI #: _____	6. Email: _____
7. Mailing Address: _____ _____	
8. Work Phone: _____	9. Cell Phone: _____
10. Amount Requested: _____	11. Amount of Cost Share: _____
12. Project Start Date: _____	13. Project End Date: _____
14. Project Director Information	
Name: _____	
Mailing Address: _____ _____	
Email: _____	
Work Phone: _____	
Cell Phone: _____	
_____ <i>Signature of Project Director</i>	
15. Fiscal Agent Information	
Name: _____	
Mailing Address: _____ _____	
Email: _____	
Work Phone: _____	
Cell Phone: _____	
_____ <i>Signature of Fiscal Agent</i>	

16. Project Summary. Include a brief and concise statement of the project goals, activities, and impact.

SECTION II. PROJECT DESCRIPTION

Submit a complete narrative as a separate document describing your project using the following subsections as listed in the Application Guidelines:

- | | |
|---|---------------------------------|
| 1. Goals, Outcomes, and Outputs | 5. Evaluation Plan |
| 2. Alignment of Goals and Outcomes to SMP | 6. Personnel |
| 3. Humanities Content | 7. Project and Funds Management |
| 4. Audience | |



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SECTION III. PROJECT BUDGET

1. Cost Share

a. Cash from Applicant	\$
b. In-Kind	\$
c. Cash Contributions from Other Non- Federal Sources	\$
d. Total Cost Share	\$

2. Project Costs. Refer to 2 CFR Part 200 Subpart E. Cost Principles.

ITEM	SUBRECIPIENT COST	NMHC COST	TOTAL
1. Advertising & Public Relations (2 CFR § 200.421)			
2. Compensation (2 CFR § 200.430)			
3. Conferences (2 CFR § 200.432)			
4. Materials & Supplies (2 CFR § 200.453)			
5. Participant Support (2 CFR § 200.456)			
6. Professional Services (2 CFR § 200.459)			
7. Publications (2 CFR § 200.461)			
8. Rental Costs (2 CFR § 200.465)			
9. Travel (2 CFR § 200.475)			
10. Other Costs			
11. Indirect Costs (2 CFR § 200.414)			
TOTAL			

3. Total project costs (Total Cost Share + Total Project Cost): \$ _____

Signature of Project Director: _____ Date: _____



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Title of Project: _____

SECTION V. SCHOLAR'S INFORMATION

Name: _____

Institution of Employment (If Any): _____

Academic Degrees, Field of Study: _____

Mailing Address: _____ Email: _____

Work Phone: _____ Cell Phone: _____

I, _____, the undersigned, have agreed to participate in the project entitled _____, and have received a complete description of the project. My role is described below.

Scholarship and Professional Experience: *List academic training, teaching experience, research activities, and publications relevant to this project. If appropriate, include experience with non-academic audiences.*

Role in the Project: *What will be your role in the project (planner, consultant, lecturer, panelist, commentator, moderator, discussion leader, etc.)? How do you believe your role and expertise will contribute to the overall project?*

Approach to the Subject: *What approach will you take to address the subject (historical, literary, philosophical, etc.)? What are some of the major points you will make? What issues will you address? Give specific examples*

Signature of Scholar: _____

Date: _____



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SECTION VI. SELF-ASSESSMENT

	POOR	FAIR	GOOD	VERY GOOD	EXCELLENT
Please rate how well your project's goals, outcomes, and outputs demonstrate clarity, specificity, and capacity to meet an important humanities-related need in the CNMI Community?					
Please rate your project's likelihood to accomplish a wide range of SMP goals and strategies.					
Please rate how well your project promotes and supports humanities content and/or employs humanities methods.					
Please rate your project's likelihood to reach a substantial target audience within the CNMI.					
Please rate the comprehensiveness of your project's evaluation plan and methods used to measure success in relation to the project's goals, outcomes, and outputs.					
Please rate the capacity of your project's personnel in terms of executing their roles in an effective and timely fashion.					
Please rate how well your proposed spending plan presents a thorough accounting of how grant dollars will be used, with reasonable cost estimates and appropriately proportioned personnel costs.					