

# **Capitol Region Watershed District**

595 Aldine Street • Saint Paul, MN 55104 T: 651-644-8888 • F: 651-644-8894 • capitolregionwd.org

# **CRWD Partner Grant Application Template DO NOT SUBMIT - Please use the online application form**

# **Applicant Information**

Organization					
Address		City		Zip	
First Name	Last Name		Title		
Phone (office)		Phone (mob	ile)		
Email Address		Website			

# How did you hear about CRWD's Partner Grants?

(Select one of the following: Previous grantee, Direct email from staff, CRWD e-newsletter, CRWD social media, CRWD website, If other, please list.)

Are	you interested	l in receiving	CRWD's	newsletter? Y/N
AIC.	you microsicu	i ili iceci ving	, CRMD 3	

# **Project Audience**

Your answers below will be used to further understand the audiences served by CRWD's Partner Grant Program and improve our communications and engagement.

# Age of participants served by this project

(Check all that apply: 18 years or less, 19-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65-74 years, 75 years or above.)

# Race / Ethnicity of the audiences served by this project

(Check all that apply: White or Caucasian, Black or African American, Hispanic or Latino, Asian or Asian American, American Indian or Alaska Native, Middle Eastern or North African, Native Hawaiian or other Pacific Islander, If other races or ethnicities are served by this proposal; please list here.)

Identify the neighborhood, community or focus area for your project. Additional consideration given to CRWD priority areas.

(Activities must take place within CRWD's boundaries. Work serving communities in the Trout Brook, Phalen Creek, Saint Anthony Hill, Como Lake or Lake McCarrons watersheds will receive additional consideration. Please reference the map of CRWD to see our boundaries and identify these focus areas)

Languages of primary audience served by this project. (List primary languages spoken by your audience.)

Expected Number of People Served with CRWD Funding.

(List only the total number of people you expect to serve with CRWD funds. This information is used in part to determine the cost per participant and to compare project deliverables across proposals during the review process.)

## **Project Information**

In an effort to give equal consideration to new and returning applicants, CRWD will only use the project information you provide during our review process. Eligible projects include water-focused community engagement, education and art projects or programs.

Project Name

Have you received a Partner Grant from CRWD in the past?

Describe your organization's mission and goals. (250-word limit. Describe the mission and goals of your organization and how your project helps meet them.)

### Project summary

(250-word limit. Provide a high-level project summary that includes all key elements and describes how they help achieve CRWD's mission to protect, manage and improve water resources in the District. Native plantings, rain gardens and water reuse projects are not eligible for Partner Grant funding. For more information, visit <u>CRWD's Stewardship Grant Program</u>.)

List any other project partners and describe their involvement.

## **Project Tasks**

CRWD's review process will evaluate proposals by project task and fund tasks that most closely align with our mission and offer the greatest impacts. Each task will receive full or no funding. Please develop a task for each unique activity (up to four total) and include any relevant resources or tools required to increase clean water knowledge and actions with your audience. If this is the first time your organization may receive CRWD Partner Grant funding, you are eligible to request \$5,000-\$10,000. If you have previously been awarded CRWD Partner Grant funding, you are eligible to request \$5,000-\$20,000.

Task 1

Task 1 Name

Our mission is to protect, manage and improve the water resources of Capitol Region Watershed District.

# Describe task 1 and how the activity helps achieve CRWD's mission to protect, manage and improve water resources of the District.

(250 word limit.)

#### Task 1 Deliverables and Outcomes

(List all deliverables (products) created as a result of this project including any anticipated numeric data (Examples: 500 people engaged, design and fabrication of 2 signs, translators for 3 walking tours, 2 boat rentals, 4 bus trips for transportation, printing 200 postcards etc.) List any outcomes such as increased clean water knowledge and actions.)

#### Task 1 Staff Costs

(Only staff costs/expenses directly related to the project are eligible for funding. If approved, a detailed list of staff hours and hourly fees will be requested.)

#### Task 1 Material Costs or Other Expenses

(Please list the total cost of the following expenses for this task including: project supplies, food, incentives, marketing and communications, and other expenses. If approved, a more detailed budget with these expense categories will be requested.)

#### Task 1 Total CRWD Funding Request

#### Task 2

Task 2 Name

# Describe task 2 and how the activity helps achieve CRWD's mission to protect, manage and improve water resources of the District.

(250-word limit.)

#### Task 2 Deliverables and Outcomes

(List all deliverables (products) created as a result of this project including any anticipated numeric data (Examples: 500 people engaged, design and fabrication of 2 signs, translators for 3 walking tours, 2 boat rentals, 4 bus trips for transportation, printing 200 postcards etc.) List any outcomes such as increased clean water knowledge and actions.)

#### Task 2 Staff Costs

(Only staff costs/expenses directly related to the project are eligible for funding. If approved, a detailed list of staff hours and hourly fees will be requested.)

#### Task 2 Material Costs or Other Expenses

(Please list the total cost of the following expenses for this task including: project supplies, food, incentives, marketing and communications, and other expenses. If approved, a more detailed budget with these expense categories will be requested.)

Our mission is to protect, manage and improve the water resources of Capitol Region Watershed District.

## Task 2 Total CRWD Funding Request

### Task 3

Task 3 Name

Describe task 3 and how the activity helps achieve CRWD's mission to protect, manage and improve water resources of the District.

(250-word limit.)

## Task 3 Deliverables and Outcomes

(List all deliverables (products) created as a result of this project including any anticipated numeric data (Examples: 500 people engaged, design and fabrication of 2 signs, translators for 3 walking tours, 2 boat rentals, 4 bus trips for transportation, printing 200 postcards etc.) List any outcomes such as increased clean water knowledge and actions.)

#### Task 3 Staff Costs

(Only staff costs/expenses directly related to the project are eligible for funding. If approved, a detailed list of staff hours and hourly fees will be requested.)

#### Task 3 Material Costs or Other Expenses

(Please list the total cost of the following expenses for this task including: project supplies, food, incentives, marketing and communications, and other expenses. If approved, a more detailed budget with these expense categories will be requested.)

### Task 3 Total CRWD Funding Request

#### Task 4

Task 4 Name

# Describe task 4 and how the activity helps achieve CRWD's mission to protect, manage and improve water resources of the District.

(250-word limit.)

#### Task 4 Deliverables and Outcomes

(List all deliverables (products) created as a result of this project including any anticipated numeric data (Examples: 500 people engaged, design and fabrication of 2 signs, translators for 3 walking tours, 2 boat rentals, 4 bus trips for transportation, printing 200 postcards etc.) List any outcomes such as increased clean water knowledge and actions.)

#### Task 4 Staff Costs

Our mission is to protect, manage and improve the water resources of Capitol Region Watershed District.

(Only staff costs/expenses directly related to the project are eligible for funding. If approved, a detailed list of staff hours and hourly fees will be requested.)

## Task 4 Material Costs or Other Expenses

(Please list the total cost of the following expenses for this task including: project supplies, food, incentives, marketing and communications, and other expenses. If approved, a more detailed budget with these expense categories will be requested.)

## Task 4 Total CRWD Funding Request

## **Project Costs**

If awarded, a detailed budget will be requested for the approved tasks including staff time (hourly rate and # of hours) and a breakdown of project supplies, food, incentives, marketing and communications, and other expenses. If this is the first time your organization may receive CRWD Partner Grant funding, you are eligible to request \$5,000-\$10,000. If you have previously been awarded CRWD Partner Grant funding, you are eligible to request \$5,000-\$20,000.

Total Requested Funding for Staff (Sum of Staff Cost for Tasks 1-4)

Total Requested Funding for Materials or Other Expenses (Sum of Material Costs or Other Expenses for Tasks 1-4)

Total Requested CRWD Funding (Sum of Total CRWD Funding Request for Tasks 1-4)