Minnesota Department of Natural Resources

Minnesota’s Lake Superior Coastal Program

2020 Annual Notice of Grant Opportunity

*(can insert applicant logo here)*

# *Grant Application Template*

* *Read the entire Notice of Grant Opportunity before starting your application.*
* *Read the entire Applications Instructions*
* ***Delete all italicized text before submitting your application.***

## Project Overview

Project Title:

Coastal Management Goal:

Project Location:

Project Category:

### Applicant

Applicant:       Type of Applicant:

Benefitting Organization (if applicable):

Address:

City:       State:       Zip:

Mailing Address (if different):

#### Official with Authority (Grant Agreement Signatory)

Name:       Title:

Email Address:       Phone Number:

Mailing Address (if different):

#### Project Manager

Name:       Title:

Organization:

Email Address:       Phone Number:

#### Grant Administrator

Name:       Title:

Organization:

Email Address:       Phone Number:

### Financial Information

DUNS Number:       SAM Registration:  Federal Audit:

Total Project Cost:

Grant Request:       Applicant Match:

## Certification

By submitting this application, I certify that:

* I have the authority to apply for this grant.
* I have disclosed any actual, potential, or perceived conflicts of interest.
* This application has been submitted without collusion with and without any agreement, understanding or planned common course of action with any other responder of materials, supplies, equipment, or services, designed to limit fair and open competition.
* The contents herein are true and accurate.

Submitted by:       Date:

## Project Summary

*The following is all unlocked and you can edit as you need.*

*Provide an overview of your proposed project. It should be no more than one page.*

## Project Description

*Project Description is limited to seven pages.*

### Impact to Coastal Area

*Describe how your project supports, preserves, protects, or enhances Lake Superior and the coastal area. Describe the need for your project and present existing evidence, documented or anecdotal, which confirm the need. Outline who will use and/or benefit from the project.*

### Relevance to the Coastal Program

*Describe the importance and/or relevance and applicability of the project to the program goals.*

### Priorities

*Describe how the activities achieve one or more of the three Coastal Program priorities.*

### Results

*State the results you are expecting from the project during the grant period. Your results must be specific, measurable, achievable, relevant, and trackable.*

### Scope of Work

*Describe specific approaches to achieving those results, including methods, timelines, and expected outcomes. It is meant to be concise, a basic guideline to demonstrate that you will complete the project within the timeline.*

### Project Management

*Describe how your organization will manage the project.*

*Include:*

* *Your organization’s capabilities in administering a grant of this size and scope, e.g., project management experience, your approach to fiscal management, and overall experience. Include prior grant experience with the State of Minnesota.*
* *Describe federal, state, and/or local partner involvement and/or commitment to the project; define their roles and responsibilities. Make sure to clarify how each are essential to the success of the project. Note whether Letters of Support are included with the application.*

## Budget

*Enter whole numbers in the appropriate categories. Do not add additional detail to this table.*

| **Categories** | **Grant** | **Match** | **Total** |
| --- | --- | --- | --- |
| Salaries  | 0 | 0 | 0 |
| Fringe Benefits | 0 | 0 | 0 |
| Travel | 0 | 0 | 0 |
| Equipment  | 0 | 0 | 0 |
| Supplies | 0 | 0 | 0 |
| Contract Costs | 0 | 0 | 0 |
| Construction | 0 | 0 | 0 |
| Other Costs | 0 | 0 | 0 |
| Indirect Costs | 0 | 0 | 0 |
| **Total Project Costs** | **$0** | **$0** | **$0** |

### Budget Detail

*Delete unnecessary categories. Budget Detail is limited to two pages.*

#### Personnel

***Example***

*Jane Doe; Principal Investigator; $2,588: 75 hours at $30/hour plus 15% fringe; $1,588 grant request; $1,000 match from (organization).*

*Tasks: Field Work and Community Meeting Facilitation*

#### Travel

***Example***

*4 trips to Grand Marais for community meetings: 166 miles (round-trip) x $0.58 = $96.28*

*Lunch in Grand Marais: $11.00 x 4 days = $44.00*

#### Equipment

***Example***

*Equipment Name: # units/price (purchase/rent)*

*Tasks:*

*Include Maintenance Plan*

#### Supplies

***Example***

*Supply Name, description: # units x price = total*

*Tasks:*

#### Contract Costs

*List contracts, provide detail*

#### Construction Costs

*List costs, provide detail*

#### Other Costs

*List costs, provide detail*

#### Indirect Costs

*List rate, and which expenses are included in the formula*

## Appendices

* *List appendices, limited to ten pages*

## Supporting Documentation

*List supporting documentation (no page limit)*

* *Indirect Cost Rate Negotiation (if applicable)*
* *Financial Review (required for nonprofits applying for $25,000 or more)*
* *Letters of Support (if submitted)*
* *Partner Review*