

Small Grant: Capacity Request Form

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Minnesota Department of Natural Resources; Minnesota's Lake Superior Coastal Program

Instructions

1. Read the [guidance](#).
2. Complete this form for grant requests between \$1,000 and \$4,500.
3. Email request and required supporting documentation to mlscp.dnr@state.mn.us.
4. Attach a word document to this form, or to the email, further describing your project with a budget. The information to include is on the last page of this form.

Grant Project Contact (e.g., Principal Investigator, project lead)

Name	Title	Phone	Email
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In one or two sentences, describe the funding request (be specific)

Requested Contract Start

Requested Contract Expiration

Grant Funds Requested

Match Provided

Total Cost

Are there any potential [conflicts of interest](#) that may be associated with these activities?

Yes

No

If yes, explain

Do you expect to generate a profit from these activities?

Yes

No

If yes, who will receive the revenue and how will it be used?

If limited funds are available, are you interested in partial funding if available?

Yes

No

Grant Contract Agreement Information

Organization

SAM Unique Entity Identifier (www.sam.gov)

Address (street, city, state, zip)

Organization's Authorized Representative for Grant Contract Agreement (not for DNR requests)

Name

Title

Phone

Email

Address (street, city, state, zip)

The DNR uses DocuSign for grant contract agreements. Please include name, title, and email address of each person that will/must sign the agreement on your behalf.

Signer 1: Name

Title

Email Address

Signer 2: Name

Title

Email Address

Certifications

By submitting this application, I certify that:

I have the authority to apply for this grant.

I have disclosed any actual or potential conflicts of interest, see [State Policy 08-01](#).

I am submitting this application 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.

Per [State Policy 08-04](#), I warrant that my organization has not been suspended or debarred from doing business with the State of Minnesota or with the federal government.

The submission of inaccurate or misleading information may be grounds for disqualification from the grant contract agreement award and may subject me and my organization to suspension or debarment proceedings, as well as other remedies available to the State, by law.

I certify that this information is true, correct, and reliable.

Signature:

Date:

For Coastal Program Use Only

Comments:

State's Authorized Representative: _____ Date: _____

Project Information

Please be concise but add as much detail as necessary to adequately describe your request. You may insert or attach agendas, maps, pictures, or graphics as appropriate.

In approximately 500 words or less, describe the activity (who, what, when, where, and why).

Include the need, the local/organization priority or initiative. Explain how you will manage the activities and lasting benefits of the actions.

If hosting or attending an event: Include the key audience and how many people you expect to participate. Describe support from or involvement of the key audience. Attach a flyer, invitation, or agenda (if available).

If purchasing equipment: describe the maintenance plan and expected 'life' of the item (e.g., years, number of uses).

Provide detail for any outdoor activities to be funded by the grant. (e.g., locations/sites; methods including access; species and habitat onsite; and any environmental concerns that may exist.)

Describe how this activity enhances or supports coastal management.

List project partners, including their role and responsibilities.

List the source of the required 10% match. (e.g., participant time, university funds, township funds.)

Budget

Describe the project costs. Include: funding category, item, total cost, grant funds requested, and match pledged. For example:

- **Travel:** Shoreline Ordinance workshop in Minneapolis.
 - Total = \$548 (grant: \$500; match: \$48)
 - Mileage – Duluth to Minneapolis (\$0.70/mile, 300 miles round trip)
 - Hotel (\$150/night, 2 nights)
 - Meals (2 dinners, \$19/each)

Personnel Staff/volunteer name or position; # hours, \$/hour, fringe description; tasks/roles

Travel Mileage/Transportation (# miles; \$/mile; airfare) Meals (days; \$/day or meal) Lodging (\$/night)

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

Supplies List each supply & cost, describe use

Contract List contracts, provide detail

Other List costs, provide detail. Include conference expenses: facilities, refreshments, supply costs, speakers

Indirect Include negotiated indirect cost rate or 15% de Minimis