



APPLICATION FOR COMMUNITY AND URBAN FORESTRY GRANTS

State Form 55857 (R2 / 6-19)
INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF FORESTRY

****Please read the guidelines thoroughly before completing this application at www.in.gov/dnr/forestry/8303.htm.**

APPLICANT INFORMATION			
Applicant (Agency or Organization - this is the entity that will manage the funds, not a person)			
Name of applicant official		Title	
Address (number and street or PO Box)			
City		State	ZIP code
Telephone number ()		Fax number ()	E-mail address
Community population	U.S. Congressional District		Federal identification number
PROJECT COORDINATOR CONTACT INFORMATION			
The Project Coordinator is the principal contact for carrying out the project and delivering financial activity and match information to the Applicant. The CUF program will send all documents regarding this proposal to the Project Coordinator via E-mail or Postal mail.			
Name of project coordinator		Title	
Address (number and street or PO Box)			
City		State	ZIP code
Telephone number ()		E-mail address	
PROJECT ASSISTANT CONTACT INFORMATION			
Grant projects MUST HAVE one person IN ADDITION TO the Project Coordinator assisting with the project or aware of its progress. This is to insure if one person leaves the project can carry on. Information will be checked; if not valid, application will be returned or dismissed.			
Name of project assistant		Title	
Address (number and street or PO Box)			
City		State	ZIP code
Telephone number ()		E-mail address	
This grant was prepared by:			
Name			
Telephone number ()		E-mail address	

Title of project		
Project Summary (Please include a brief summary including project location 100 words or less.)		
Match must equal or exceed the total grant amount request. These numbers must agree with the budget.		
Grant dollar request	Cash match	In-kind match
<p><i>Federal Grant Rules: the Transparency Act, now requires the names and salaries of the top three (3) executives of the applicant entity (this includes municipal government, county government, state government, non-profit, college or university). Project proposals who are awarded funds are required to provide this information <u>upon award</u>. Sub recipient are held to 2 CFR 200.331 http://www.gpo.gov/fdsys/granule/CFR-2014-title2-vol1/CFR-2014-title2-vol1-sec200-331 (requirements for pass through entities.)</i></p>		
To the best of my knowledge, the information supplied in this application and in the attachments is complete and correct. The governing body of the applicant duly authorizes the document.		
Signature of applicant official*		Date signed (month, day, year)
Printed name of applicant official		Title
Telephone number ()	E-mail address	
<p>* This official is the legal governing body of the applicant. For example: Mayor, Town Board President, or Park Board President. The Board president should sign in the case of a not for profit organization. The person signing this application must have the authority to sign the final grant agreement upon award.</p>		
<p>PLEASE ATTACH:</p> <p>PROJECT NARRATIVE - see <i>guidelines</i>. The entire narrative should not exceed four (4) pages. The following items should be included in the application as Labeled Appendix items. (Ex: Appendix A - Narrative)</p> <p>PROJECT TIMELINE - see <i>guidelines</i>.</p> <p>PROJECT BUDGET - see <i>guidelines</i>. Please follow the template provided in the guidelines.</p> <p>PUBLIC COMMENT FORMS - see <i>guidelines</i> State Form 55862 is provided as a separate document. A total of six (6) are required.</p>		