



## 2018 Grant Application

1601 Oxbow Drive, Suite 360B  
Montrose, CO 81401  
(970) 249-9438 \* SandyH@MontroseEDC.org  
**Application Deadline: May 30, 2018**



MEDC is looking for projects, programs and organizations that are actively working to improve the financial stability of local businesses, expand entrepreneurial opportunities and increase economic vitality to the **West End of Montrose County**. Economic development efforts that seek to improve the economic well-being and quality of life for the community by creating and/or retaining jobs and support or growing incomes and the tax base. Organizations and businesses may apply for funding for Projects or Programs in the following **Focus Areas**:

- Healthcare Funding
- School Support
- Outdoor Recreation Development
- Entrepreneurial Development
- Community Enhancement Projects
- Matching Funds Requests

The following criteria will be used by MEDC Board of Directors for evaluation:

• Stimulate job creation	• Maintain/strengthen existing businesses	• Build collaboration
• Promote economic growth	• Enhance regional prosperity	• Show the community's attributes
• Create/improve local commerce	• Offer sustainable progress	• Demonstrate ability to leverage funds

### Applicant Information

Name of Organization/Individual:	
Phone Number:	Address:
Tax ID #: Is your Organization a 501(c)3? <input type="checkbox"/> Yes <input type="checkbox"/> No	E-Mail:
Your Organization's Mission Statement: (if applicable)	
Describe how your program/project is aligned with the <b>Focus Areas</b> listed above:	

### Financial Information

Current Annual Organization's Budget: (if applicable) \$	
Program/Project Budget: \$	
Amount requested: (Not to exceed \$50,000) \$	Is partial funding an option? <input type="checkbox"/> Yes <input type="checkbox"/> No
Will fund be used for a matching grant application? (If so, describe)  <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the grant requested for:  <input type="checkbox"/> A capital expenditure <input type="checkbox"/> An unbudgeted item <input type="checkbox"/> A new project/expense <input type="checkbox"/> Expand staff <input type="checkbox"/> New Business/start-up funding <input type="checkbox"/> Other	

Describe what the grant will be used for:

Will any full-time permanent jobs be created? If so, how many?

Yes  No

### Project Information

Please provide summary of the program or project request. Include the issue and/or opportunity addressed, goals and objectives:

Please summarize the program or project for which you are requesting the grant in the terms of impact to the local community. Specifically, how many people will benefit, explain the impact in terms of how it might help shape the future of the population affected or involved or local community as a whole:

Other Comments:

Person Submitting Application:

Title:

Phone Number:

E-mail:

Signature:

Date:

Grant award(s) will be determined by June 30, 2018

***Please note that MEDC will not consider any projects/programs that break any local, state or federal law or regulation in any way.***