

# General Grant Application Form

Group Requesting:

Contact Person:

E-mail address:

Phone No.:

Date of Request:

Grant Amount:       Grant Period:       Total grant budget:

[ ]  Organizing Fund [ ]  Political Fund [ ] Expedite Funding

A grant plan and draft budget must be attached to this application form.

This report is to be signed by an officer of your organization’s governing body.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return to: grants@mape.org or via mail:

Minnesota Association of Professional Employees

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