

The Kent County Medical Society Alliance Foundation promotes the health and well-being of individuals, programs and organizations in greater Grand Rapids.

GUIDELINES

Thank you for your interest in our Mini-Grant Program. Consideration is given to requests that meet the following criteria:

- 1. Provide health education, medical services, or medical supplies.
- 2. Promote social welfare.
- 3. Demonstrate a relationship between the project/proposal and the goal of the KCMSA Foundation.
- 4. Are located in greater Grand Rapids.
- 5. Are \$3,000 or less.
- 6. A 501(c)(3) non-profit organization.
- 7. Meet reporting requirements upon conclusion of your project/proposal including but not limited to a recap of the success of the grant money given. Photos are welcomed.
- 8. Spend the grant dollars within one calendar year of receipt.

NOTE: We do **NOT** grant funds for paid staff positions, office supplies or office equipment.

APPLICATION REQUIREMENTS

Type and attach in the following order. Include any additional information that would aid our decision.

- 1. Create a cover letter by copying this page and filling out the information below.
- 2. Describe the project/proposal. Include the purpose, need, target population and geographic area your organization will address with funds from this grant.
- 3. List the names and qualifications of the individuals who will implement this project/proposal.
- 4. Attach project budget. Be specific.
- 5. How does your project/proposal meet the goals of the Foundation?
- 6. Give a one page or less description of your organization.
- 7. Attach your organization's budget for the current year.
- 8. Attach your organization's 501(c)(3) IRS tax identification letter.

PROCESS

The KCMSA Foundation Board of Directors reviews grant requests four times a year. Applicants will be notified of decisions approximately one month after each deadline. You will receive confirmation of your grant submission within 1 week. If you have not heard from us in that time frame, please contact foundation.president@kcmsalliance.org.

Grant Application Deadlines — August 15, October 15, February 15, & April 15. *Mail to:* KCMSA Foundation, 233 East Fulton, Suite 222, Grand Rapids, MI 49503 or foundation.president@kcmsalliance.org

PROJECT/PROPOSAL TITLE				APPLICANT,	ORGANIZATION
CONTACT name, phone, address					
DATE:/	O NEW REQUEST	O RENEWAL	AMOUNT \$		
OFFICE USE ONLY: Tax ID #: Foundation Board Action Date:/_ Reason for denial:		Check payable to: Disapproved O Ap	pproved	Date Paid:	//