

**Application ID:**

**Application Type:** Rural Health Small Grant

**Organization:**

**Primary Contact:**

**Project Title:**

## Grant Application

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### Eligibility Criteria

MTHF will only fund Montana-based organizations. Montana-based organizations that are eligible to apply for funding include:

- Tax-exempt, charitable organizations described in Section 501(c)(3) of the Internal Revenue Code (excluding those classified as private foundations or any type III non-functionally integrated supporting organization under section 509(a) of the Code)
- Tax-exempt educational institutions
- State, tribal, or local government agencies

Please refer to the [eligibility criteria](#) for more detail.

Please Select

### Fiscal Sponsor

Are you applying with a fiscal sponsor?

- Yes
- No

## MTHF Fiscal Sponsor Policies

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MTHF accepts applications from organizations that are applying with a fiscal sponsor. If we fund your project, the grant will be awarded to the fiscal sponsor. We will contact the fiscal sponsor for additional information before we make the award.

## Fiscal Sponsor Organization Name

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## Fiscal Sponsor Organization EIN

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Please enter your fiscal sponsor's EIN number. You may need to contact them for this information.

## Fiscal Sponsor Contact Information

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Please list the name, email and phone number for your contact person at the fiscal sponsor organization. We may reach out to this person for more information.

I have read and agree to comply with [MTHF's Guidelines on Supplanting](#).

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## Organization Description and Mission

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Please briefly describe your organization and mission. *(1500 character limit)*

## Project Information

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### Title

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Please provide a short, descriptive title for your application with any acronyms spelled out.

## Project Description

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Describe your project. What will you accomplish? *(3000 character limit)*

## Health Problem

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How will this project support health and wellbeing in your community? Does it relate to a specific health issue? *(3000 character limit)*

## Montana Geographic Regions Served

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Please select the [geographic regions](#) your project will serve.

- Statewide
- North Eastern
- Eastern
- North Central
- South Central
- Western
- Multiple Regions

### Montana Counties Served

Please select the county or counties your project will serve.

- |                                     |                                     |  |                                      |                                       |                                      |                                      |
|-------------------------------------|-------------------------------------|--|--------------------------------------|---------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Statewide  | <input type="checkbox"/> Custer     | <input type="checkbox"/> Glacier         | <input type="checkbox"/> Lincoln     | <input type="checkbox"/> Phillips     | <input type="checkbox"/> Sanders     | <input type="checkbox"/> Wheatland   |
| <input type="checkbox"/> Beaverhead | <input type="checkbox"/> Daniels    | <input type="checkbox"/> Golden Valley   | <input type="checkbox"/> McCone      | <input type="checkbox"/> Pondera      | <input type="checkbox"/> Sheridan    | <input type="checkbox"/> Wibaux      |
| <input type="checkbox"/> Big Horn   | <input type="checkbox"/> Dawson     | <input type="checkbox"/> Granite         | <input type="checkbox"/> Madison     | <input type="checkbox"/> Powder River | <input type="checkbox"/> Silver Bow  | <input type="checkbox"/> Yellowstone |
| <input type="checkbox"/> Blaine     | <input type="checkbox"/> Deer Lodge | <input type="checkbox"/> Hill            | <input type="checkbox"/> Meagher     | <input type="checkbox"/> Powell       | <input type="checkbox"/> Stillwater  |                                      |
| <input type="checkbox"/> Broadwater | <input type="checkbox"/> Fallon     | <input type="checkbox"/> Jefferson       | <input type="checkbox"/> Mineral     | <input type="checkbox"/> Prairie      | <input type="checkbox"/> Sweet Grass |                                      |
| <input type="checkbox"/> Carbon     | <input type="checkbox"/> Fergus     | <input type="checkbox"/> Judith Basin    | <input type="checkbox"/> Missoula    | <input type="checkbox"/> Ravalli      | <input type="checkbox"/> Teton       |                                      |
| <input type="checkbox"/> Carter     | <input type="checkbox"/> Flathead   | <input type="checkbox"/> Lake            | <input type="checkbox"/> Musselshell | <input type="checkbox"/> Richland     | <input type="checkbox"/> Toole       |                                      |
| <input type="checkbox"/> Cascade    | <input type="checkbox"/> Gallatin   | <input type="checkbox"/> Lewis and Clark | <input type="checkbox"/> Park        | <input type="checkbox"/> Roosevelt    | <input type="checkbox"/> Treasure    |                                      |
| <input type="checkbox"/> Chouteau   | <input type="checkbox"/> Garfield   | <input type="checkbox"/> Liberty         | <input type="checkbox"/> Petroleum   | <input type="checkbox"/> Rosebud      | <input type="checkbox"/> Valley      |                                      |

### American Indian Reservations or Urban Indian Populations Served

Will your project focus on an American Indian reservation or urban Indian population? Please select any community that your project will serve.

- |  |   |
|--|---|
| <input type="checkbox"/> Blackfeet         | <input type="checkbox"/> Crow           |
| <input type="checkbox"/> Flathead          | <input type="checkbox"/> Fort Belknap   |
| <input type="checkbox"/> Fort Peck         | <input type="checkbox"/> Little Shell   |
| <input type="checkbox"/> Northern Cheyenne | <input type="checkbox"/> Rocky Boy      |
| <input type="checkbox"/> Urban             | <input type="checkbox"/> Not Applicable |

## Demographic Information for Populations Served

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Will any of the following populations be a central focus of your project?

- Low income/economically disadvantaged
- Children
- American Indian/Alaska Native
- Other racial and ethnic minorities
- People with disabilities
- Older adults
- Other

## Additional Information

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Is there more information or materials that will help us better understand your project (like a brochure, flyer, or other resources)?

## Grant Budget

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In this section, you will provide a budget for the funds requested from MTHF. You can either list the budget expenses in the budget narrative **OR** upload a budget. You do not need to complete both. Please include estimated dollar amounts per category of expense. For example:

- \$2,000 for travel costs
- \$5,000 for contract with consultant
- \$1,000 for meeting supplies
- TOTAL: \$8,000

Please only include expenses that would be covered by the MTHF grant.

## Total Funding Request

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What dollar amount are you requesting from MTHF?

## Budget Narrative

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How will you use MTHF funds for your project? You can list how you plan to use the funds in the text box below or upload a budget.

## Budget Upload

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If you'd prefer to upload a budget, please include only the project expenses that the MTHF grant would cover. You can use your own budget template or use this sample template: [MTHF Grant Budget](#). You do not need to upload a budget if you completed the budget narrative.