



Grant Application Cover Page

Information provided on the application should reflect the organization that is applying for the grant and accepting fiscal responsibility for any funds received. Fiscal sponsors are required to send a letter of consent, signed by the organization's director.

Deliver proposals via email to bpinfo@yahoo.com, a confirmation email to the sender will follow when the proposal is received. If you have not received confirmation within 24 hours of the deadline on February 1st, contact Lynn Olson immediately at (608)556-3055.

Please include this document with your proposal

Name of Organization Applying for Funding:

Title (ie. CEO/CFO):

Address:

City:

State:

Zip:

Telephone: () -

Fax: () -

Contact's email:

Website address:

Organization's Federal Employee Identification Number (FEIN):



Title of Proposal:

Provide a 2-sentence summary of the proposal:

Name and title of organization's preferred contact for follow-up questions:

Telephone: () -

Email:

Assign a percentage (0 - 100%) to indicate the relevance your proposal has in common with these separate Blooming Prairie Foundation mission items.

Organic Foods (Development, Research, Education)

Organic or Natural Food Products or Services

Cooperative Development (In the organic or natural products industries)

Amount Requested from Blooming Prairie Foundation:

Total Budget for this Project:

Amount Provided by Your Organization:

Amount Requested from Other Sources:

Date by which the Blooming Prairie Foundation Funds are needed:

Authorized Signature for the Organization (required) :

Title:

Date:

Please email the proposal and budget by the deadline (2/1/12) to bpinfo@yahoo.com.

If materials must be mailed, please use the address below:

Blooming Prairie Foundation
c/o Willy Street Grocery Cooperative
Lynn Olson
1882 E. Main Street, 2nd Floor
Madison, WI 53704



Grant Application – Budget Form

If your organization already prepares organizational and project budgets that approximate this format, please feel free to submit them in their original forms.

What period does this budget represent?

EXPENSES (for the organization):		REVENUE (for the organization):	
ITEM	AMOUNT	SOURCE	AMOUNT
Salaries and Wages (List individual positions and full- or part-time status)	\$	Government grants & contracts	\$
		Foundations	\$
		Corporations	\$
		Earned Income	\$
Fringe Benefits:	\$	United Way or other federated campaigns	\$
Payroll Taxes:	\$	Individual contributions	\$
Consultants & Professional Fees	\$	Fundraising	\$
Travel	\$	Membership Income	\$
Equipment	\$	In-kind support	\$
Supplies	\$	Other	\$
Printing & copying	\$		
Postage & delivery	\$		
Rent & utilities	\$		
In-kind expense	\$		
Other (specify)	\$		
TOTAL EXPENSES	\$	TOTAL REVENUE	\$