WORKS IN PROGRESS
MINI-GRANT APPLICATION
SUPPORTING WOMEN AND GIRLS THROUGHOUT CENTRAL MINNESOTA

Application Process

- Applications must be submitted and postmarked on or before October 15, 2008.
- Applications may be submitted online at www.worksinprogress.org or printed and mailed to:
  Works in Progress, Inc., P.O. Box 282, Sauk Rapids, MN 56379.
- Applicants will receive notification of a decision within 30 days of the grant deadline.
- Funds awarded will be sent within 20 days of notification of approval.
- A final impact report listing results of the project is required within 30 days of completion of the project.

Grant Criteria

- Applications must be complete and should not exceed three pages.
- Awarded grants are typically utilized to help develop skills, build confidence and to foster a connection with community mentors. Examples include: attending a summer language camp, participating in an entrepreneurial leadership retreat, purchasing materials and supplies to create a community art project, and attending a certification course.
- Young women, under the age of 18, must have an adult mentor involved in their project.
- Grant money will be made payable to the training provider, organization or camp, not to the grantee.
- Grant selection is based on answers to application questions and on recommendations supplied by applicants.
- Grants are small, usually $100 to $500. No repayment is expected, although it is hoped that recipients will "pay forward" their experience by mentoring others as part of their future endeavors.

Eligibility

Any woman of any age within central Minnesota is eligible to apply for the Works in Progress Mini-Grant. Central Minnesota is defined as a 100-mile radius of St. Cloud, Minnesota.

Submit grant application online at www.worksinprogress.org or by mail to:

Works in Progress, Inc.
P.O. Box 282
Sauk Rapids, MN 56379

Questions
Contact Works in Progress, Inc.
Email: winpinc@aol.com
Phone: 320.259.1956
WORKS IN PROGRESS
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Applicant Information:

Name: ________________________________________________________________

Address: ____________________________________________________________________________

City: ___________________________ State: _______ Zip: _____________________________

Phone: __________________________ Email: _______________________________

Age (if under 18): ___________

Mentor Name (if under 18): ________________________________________________

Phone: __________________________ Email: _______________________________

Grant Request Amount: $___________  Total Project/Activity Cost: $______________

Project Start Date: ______________ Project End Date: _________________

Questions:

Please give a brief description of the project/activity for which you wish to receive a grant:

What do you hope to learn or accomplish through this project/activity?

Explain how you will know that the outcome of the project/activity is successful?

How will participating in this project/activity impact your future?
**Recommendations/Supporting Materials:**

You may submit three letters of recommendation from individuals who support you in your goal.

**Grant Payment:**

Checks will be made payable to the organization responsible for the project/activity.

Organization Name: ____________________________________________________________

Address: _______________________________________________________________________

City: __________________________ State: ________ Zip: ________________

Phone: __________________________ Email: _________________________________

Website: _________________________________________________________________

**Applicant Signature:**

_________________________________________________________ Date: ___/___/____