



Southern Maryland Heritage Area Consortium

***Southern Maryland Heritage Area Consortium (SMHAC)
Seed Grant Application
Due to SMHAC September 14, 2018***

Date: _____

Name of Organization: _____

Address: _____

Contact person: _____

Telephone: _____ Fax: _____

E-Mail of contact: _____

Web site address of organization: _____

Is this organization a non-profit approved by the Internal Revenue Code? If so, please provide copy of notification letter and write tax number here: _____

TITLE of project: _____

Is this a new or existing program/activity? _____ New _____ Existing

If existing please explain unique or new aspects that contribute to the qualifying criteria:

Has this program/event/group been supported by grants in the past? _____ Which ones and for how many years?

Describe the project/activities and resulting products the grant would support:

PROJECT TASKS AND TIMELINE:

What steps have you taken thus far to begin this project? _____

What steps (meetings, task assignments, contracts, etc.) will it take to bring this to completion?



Southern Maryland Heritage Area Consortium

If this grant will support an event when and where will the event take place?

When? _____

Where? _____

What are the target markets for the program/event? _____

How does this project fit the stated criteria of the Seed Grant fund?

Name the key people who will conduct the grant activities or manage the project and briefly describe their qualifications or position with your organization: _____

Provide a Budget breakdown for the project, use more space or attach an additional page if necessary:

Amount of Seed Grant request: \$_____ (maximum of \$5,000.00)

Total budget for the project: \$_____

Briefly list costs you expect to be associated with bringing this project to completion:

Source of matching funds. list all sources and dollar amounts as well as any in-kind:

Estimated time frame: Event or program planning Start date: _____

End date, date of event or program: _____



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Include mission statement, Board of Directors list, and 1-3 letters of support.

Applicant signature (name, title, date):

Signature: _____

Printed Name: _____

Title: _____ Date: _____

Email contact: _____

Phone _____

PLEASE NOTE: It is an absolute requirement that the Southern Maryland Heritage Area Consortium and the Maryland Heritage Areas Authority be acknowledged for our contribution to this project. Your award letter/agreement will have information on how to accomplish this.