

# Aaniiih Nakoda Community Foundation

## Organizational Grants Application



Please fill the application out completely. Provide all necessary documentation as requested. All requests must be submitted in a timely manner with at least (15) Days in advance prior to the event. If the ANCF Board of Directors' approval is needed, turn it in before the 2nd Friday of the month to be added to the monthly meeting agenda. All requests will need to follow the grant guidelines.

### **Organization or Group information**

**Name:**

**Mailing Address:**

**Phone number:**

**Email address:**

**Tribally affiliated: YES NO**

**Main Location: Agency Hays Lodge Pole Dodson Harlem**

**Other: \_\_\_\_\_**

**Do you have an EIN (Employer Identification Number)? YES NO**

**Do you have a Board of Directors? YES NO**

**Are you a certified non-profit organization? YES NO**

**If NO, do you have plans to do so? YES NO**

### **Eligible Category (Check all that apply)**

**Youth**

- Elder Support**
- Veteran Event/Activity**
- Health and wellness activity**
- Aaniiih and Nakoda Cultural event**
- Educational support**
- Arts community support**
- Community Activity or Event not listed:** \_\_\_\_\_

**Do any of the following apply?**

- Advertising and promotions**, including advertising solicited on behalf of another organization.
- Fundraisers** working on behalf of an organization.
- Federally funded programs serving the FBIC (Fort Belknap Indian Community)** (i.e., BIA/IHS/Tribal Program hosted events)
- For-profit Businesses**
  - Enrolled member's personal businesses on and off reservation.
- Adult Sports Teams/Individual Events Sponsorships**
  - Basketball tournaments, Indian Relay, Baseball, MMA fighting, etc.
- Family Honoring's or Personally Accepted Commitments**
  - Powwow Special/honoring, Sundance, Sports honoring, etc.
- Donations and grants for Individual's personal gain-** potential to EARN money.
  - All Rodeos, including youth, Indian Relays, Events with Payouts, etc.
- Individual/family medical emergencies**
  - medical travel support to appointments, surgeries, medical stays, etc.
- All Travel Assistance for adults**
  - *vehicle repairs to any vehicle, or upkeep*
- Capital expenditures** (i.e., tractor for individual use, livestock for individual use)
- Debt Reduction**
  - loans or help with personal debt
- Political purposes**
- Activities or expenses incurred *prior* to grant date**

- Will not pay bills, invoices, etc.

**Capital campaigns**

**If you have marked any of the boxes in the above section, your activity or event is ineligible for funding from ANCF (Aaniiih Nakoda Community Foundation). \* ANCF Reserves the right to review your application and research public events, as necessary.**

**Activity/Event Information**

**Description:**

\_\_\_\_\_

**Budget with Amount NEEDED:** \_\_\_\_\_

**Fundraising efforts so far (List amount raised):** \_\_\_\_\_

- Raffles
- Food sales
- Auctions
- Fundraising activities not listed

**Attached:**

- Flyers
- W9
- Budget
- Other pertinent documentation
  - Team information

*By signing this you agree to use the funds as described above. Everything filled out was honest and to the best of your ability.*

*You also agree to turn in an **Activity Report** for use of funds once the activity or event is completed, or risk non funding for the next fiscal year.*

*ANCF is not responsible for costs incurred during activities or events funded by the Foundation.*

**Print Name** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_