

2019-2021 Legacy Cultural Heritage and Identity Grants - Round 4

Minnesota Humanities Center

Project Overview

Project Name*

The Minnesota Humanities Center will use this title when referencing this grant, including reporting on the Legacy website.

Character Limit: 100

Project Overview*

Please provide a one paragraph overview of this project. This paragraph will be used for reporting purposes on the Minnesota Humanities Center's website, the Legacy reporting website, and elsewhere when needed.

Character Limit: 500

Project Details/Activities*

Please explain the project and specific activities that will be completed with this funding. Include not just what you will do, but how you will do it.

Also consider including detail about implementing these activities – What is the plan/process to do this work? Who will do what? Where will they take place? Why have you chosen these activities specifically?

Character Limit: 10000

Organization or Project Website

Character Limit: 2000

Project Start Date*

This date may be no sooner than January 1, 2021.

Character Limit: 10

Project End Date*

This date may be no later than December 31, 2021.

Character Limit: 10

Project Timeline*

Please explain the timeline for this project, including anticipated timing of activities outlined in the project details.

Character Limit: 2000

Counties Served*

Choices

Statewide

Aitkin

Anoka

Becker

Beltrami

Benton

Big Stone

Blue Earth

Brown

Carlton

Carver

Cass

Chippewa

Chisago

Clay

Clearwater

Cook

Cottonwood

Crow Wing

Dakota

Dodge

Douglas

Faribault

Fillmore

Freeborn

Goodhue

Grant

Hennepin

Houston

Hubbard

Isanti

Itasca

Jackson

Kanabec

Kandiyohi

Kittson

Koochiching

Lac qui Parle

Lake

Lake of the Woods

Le Sueur

Lincoln

Lyon

Mahnomen

Marshall
Martin
McLeod
Meeker
Mille Lacs
Morrison
Mower
Murray
Nicollet
Nobles
Norman
Olmsted
Otter Tail
Pennington
Pine
Pipestone
Polk
Pope
Ramsey
Red Lake
Redwood
Renville
Rice
Rock
Roseau
Scott
Sherburne
Sibley
St. Louis
Stearns
Steele
Stevens
Swift
Todd
Traverse
Wabasha
Wadena
Waseca
Washington
Watonwan
Wilkin
Winona
Wright
Yellow Medicine

Proposal Narrative

Community Involvement and Leadership questions align with the assessment criteria:

Evidence that the project is led by community:

- What degree of collaboration and community input is in the implementation of the project?
- To what degree do American Indian or immigrant people have decision-making authority for the project?
- To what degree is the diversity of experiences within the community, such as across gender, sexual orientation, age, ethnicities, disability status, etc., represented or providing input into the project?

Community Involvement and Leadership*

Who is involved in the implementation of the project? How is the American Indian or immigrant community collaborating or involved?

In what ways do American Indian or immigrant people have decision-making authority for the project?

Describe how a diversity of experiences within the community (such as across gender, age, disability status, etc.) are represented or providing input into the project.

Character Limit: 10000

Goals, Proposed Measurable Outcomes, and Evaluation questions align with the assessment criteria:

Goals, Outcomes, and Evaluation:

- To what degree do the goals, measurable outcomes, and evaluation strategy align with one another? Are they clear/do they make sense as a cohesive whole?
- To what degree do the goals, measurable outcomes, and evaluation strategy align with the project activities? How well do they fit together? Do the goals and outcomes match the proposed activities?
- To what degree does success, as defined by the applicant, seem achievable?

Goals*

What are the goals of this project? What do you hope to achieve? What does success look like to you? Your goal(s) should be centered on vision and ideas (as opposed to specifics or detailed activities).

Character Limit: 10000

Proposed Measurable Outcomes*

Please list your measurable outcomes for this project. If you accomplish your planned activities as proposed, what outcomes are you hoping to see that can be measured/tracked? (*Note: this section will be used on the Legacy reporting website*).

Character Limit: 10000

Evaluation*

How will you know if you've achieved your goals and outcomes? How will you track, measure, and evaluate them? What methods will you utilize, what information will you collect, how will you evaluate it, and what will you do with the results?

Character Limit: 10000

Impact questions align with the assessment criteria:

Degree of Impact:

- To what degree will the project make a significant impact in community?
- How strong is the provided evidence that this project will be beneficial to American Indian or immigrant communities in Minnesota?

Impact*

How will this project make an impact in American Indian or immigrant communities in Minnesota? What will change as a result of this project? How do you know this project will benefit the community? (i.e. What evidence or information are you working with that tells you your project will have an impact in your community?)

Character Limit: 10000

The **Contingency Plan** question aligns with the assessment criteria:

Contingency Plan:

- To what degree is the project achievable within the constraints of COVID-19?

Contingency Plan*

What are your plans for adjusting and moving your project forward if COVID-19 restrictions continue?

Character Limit: 10000

Additional Project Details (optional)

Please provide additional details about your project that you would like to share or that the panel requested further information on. If you have a sample of previous work or a letter of support, you may upload it.

Character Limit: 10000 | File Size Limit: 10 MB

Budget

How much are you requesting?*

Character Limit: 20

Project Budget and the **proposal narrative** as a whole aligns with assessment criteria:

Budget:

- How clear is the budget: what the expenses are/what the funds will be spent on?
- To what degree does the budget align with the project narrative?
- Is the request reasonable and appropriate – can the amount of funds requested be spent by the applicant within the proposed time frame?

Project Budget*

Please upload a project budget that lists project income and expenses. If you have additional sources of funding for this project, please clearly indicate which expenses will be covered by this grant if awarded. The Minnesota Humanities Center highly recommends that your budget line items align with your accounting system to facilitate reporting and financial monitoring during the grant term. Should your budget need any explanation, please include a narrative below.

For any questions on allowable/unallowable expenses, please consult the **Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards 2 CFR Chapter 1, and Chapter II, Parts 200, 215, 220, 225 and 230.**

Questions about this document can be directed to Laura Benson, Assistant Director of Grants and Administration, at laura@mnhum.org

Character Limit: 2000 | File Size Limit: 5 MB

FTEs and Consultants

FTEs*

How many total FTEs (Full Time Equivalents) will be funded with this grant? For example: .5 (50%) of one staff person, and .35 (35%) of another = .85 total FTEs). This information will be reported on the Legacy reporting website.

Character Limit: 20

Staff Roles*

Please describe the role(s) of the staff included in the FTE total above.

Character Limit: 500

Tracking Staff Time*

Describe the system your agency has in place to ensure that Legacy funds are charged in a way that accurately reflects actual employee time. How will you track staff time for the FTEs listed above?

Character Limit: 500

Independent Contractors*

How many total independent contractors will be funded by this grant?

Character Limit: 10

Independent Contractor Roles*

Please describe the role(s) of the independent contractors included in the total above.

Character Limit: 500

Additional Legacy Reporting Elements

This information is required by Legacy and will not be evaluated by the review panel.

Subject*

Please check the subject(s) below that best describes your project. This information will be reported on the Legacy reporting website.

Choices

Agriculture/Forestry/Mining

Archeology

Arts

Arts Access

Biological Diversity

Cultural Heritage Preservation

Education/Outreach
 Historic Preservation
 History
 Natural Areas and Habitat
 Natural Resource Information and Planning
 Recreation
 Renewable Energy
 Tourism
 Water Resources

Activity Type*

Please select the activity type that best describes your project. This information will be reported on the Legacy reporting website.

Choices

Analysis/Interpretation
 Assessment/Evaluation
 Capital Development/Rehabilitation
 Demonstration/Pilot Project
 Digitization/Online Information Access
 Education/Outreach/Engagement
 Fund Administration
 Grants/Contracts
 Inventory
 Land Acquisition
 Mapping
 Modeling
 Monitoring
 Planning
 Preservation
 Research
 Restoration/Enhancement
 Technical Assistance

Finances

Financial Review*

MHC is required, for grants of \$25,000 and above to a nongovernmental organization, to assess a recent financial statement from the organization (or its fiscal sponsor). Please indicate which of the following documents you are submitting for review, based on your organizational budget:

Choices

Most recent certified financial audit (Org income over \$750,000)
 Most recent IRS Form 990 (Org income \$50,000 or more and less than \$750,000)
 Most recent board-reviewed financial statements (Org income under \$50,000 and/or no IRS Form 990)
 NA - This grant is for less than \$25,000 or I am applying as an individual

Financial Statement Upload*

Please upload the financial statement you selected above. If you selected the fourth option, please upload a Word document that says you are not required to submit a financial statement.

File Size Limit: 5 MB

Grant Payments*

It is the Minnesota Humanities Center's policy to issue grant payments in a manner that supports the successful completion of activities outlined in the approved grant proposal. Reimbursement is the preferred method of payment for MHC grants. Grant payments may be made as advance payments at the grantee's request. MHC may not approve a request for advance payments if the financial review and past grant performance do not support this method.

Please indicate which payment method you prefer. Note that advance payments require a complete reconciliation during the grant period for grants \$50,000 and above, and 10% of the grant (regardless of the grant amount) must be withheld until after approval of the final report.

Choices

Reimbursement

Advanced

MHC staff will work with grantees to finalize the payment schedule.

Authorized Representative

Please include contact information below for your organization's authorized representative. This individual must have the authority to sign the grant agreement and any subsequent amendments and/or extensions. If you do not list a project manager in the next section, this individual will be listed on the Legacy reporting website as the project manager.

Authorized Representative's Full Name*

Character Limit: 100

Authorized Representative's Title*

Character Limit: 100

Authorized Representative's Phone Number*

Character Limit: 30

Authorized Representative's Email Address*

Character Limit: 254

Project Manager

If this grant project has a project manager beyond the organization's authorized representative, please include contact information below for this individual. Minnesota Humanities Center staff will communicate directly with this individual about the grant and s/he will be listed on the Legacy reporting website as the project manager.

Project Manager's Full Name

Character Limit: 30

Project Manager's Title

Character Limit: 250

Project Manager's Phone Number

Character Limit: 250

Project Manager's Email Address

Character Limit: 254

Authorized Representative Certifications

Intended Purpose*

I certify that all money from this grant will be spent only for arts and cultural heritage programming that preserves and honors Minnesota's history and cultural heritage.

Choices

I agree

I do not agree

Supplement not Substitute*

I certify that these grant funds will be used to supplement and not substitute other sources of funding.

Choices

I agree

I do not agree

Unallowable Expenses*

I certify that funds will not be spent on: activities unless they are directly related to and necessary for the project; indirect costs or other institutional overhead charges that are not directly related to and necessary for a specific appropriation; fundraising; taxes (except sales tax on goods and services); lobbyists and/or political contributions; bad debts, late payment fees, finance charges, or contingency funds; parking or traffic violations; or for out of state transportation.

Choices

I agree

I do not agree

Electronic Signature*

Enter your full name, business title, and the date of submission (e.g. Emi Sakura, Executive Director, September 1, 2015).

Character Limit: 250

By entering your signature information above and clicking "I Agree" below, you certify that the statements contained in this application are true and correct to the best of your knowledge and belief.*

Choices

I agree

I do not agree