



**NORTH CAROLINA CIVIL WAR TOURISM COUNCIL
2011-12 GRANT APPLICATION**

Application must be filled out completely and POSTMARKED no later than September 12, 2011. Refer to the program guidelines for more information about the process.

- 1) Thoroughly read the program guidelines before filling out the application. Make sure you understand the requirements for the grant process including reimbursement should your project be selected.
- 2) If you have any questions about the program requirements or the application, contact a member of the Grant Selection Committee as listed in the program guidelines.
- 3) The application may be filled out on-line by typing directly into the form and then printed out OR printed off and handwritten if necessary (please print). **If you fill the form out on line, use a plain (no italics or boldface) 12 point font.**
- 4) The project coordinator should be someone that is easy to contact in case there are questions about the application.
- 5) Remember to have the proper officials sign the application. This indicates that all pertinent parties are aware of the guidelines and procedures of this program and agree to abide by them.

Name of Applicant Organization:

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Project Name:

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Organization Mailing Address (include city, state and zip code)

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County:

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Project Coordinator:

Telephone:

Fax:

E-mail:

Federal ID#:

Anticipated cost of project:

Amount of NCCWTC funds requested (up to \$500.00):

Amount and source(s) of matching funds provided by your organization (required 1:1 match, up to half of the match can be in-kind):

If monies would fund an event, please fill out the following items:

Event

name:

Event date:

Anticipated attendance or most recent attendance if re-occurring:

Who is your target audience for this event?

Key event participants (i.e. re-enactors, panel participants, guest speakers)

Provide a brief description and justification of project in the space below (350 words or less). Include a statement that indicates realistically whether or not the program can be carried out without these grant funds.

ESTIMATED PROJECT BUDGET: Attach an estimated project budget.

AGREEMENT

We have read and understand the terms and requirements of this program and agree to fulfill our obligations in accordance with same *should this application be selected for funding.*

Signatures:

Project Director: _____ Date: _____

Administrative Official: _____ Date: _____

- If you are a non-profit organization, send a copy of your Letter of Tax Exempt Status from North Carolina Department of Revenue **OR** Tax Determination Letter from United States Internal Revenue Service.
- Send one (1) original and four (4) copies of your application including the project budget.
- Don't bind the application or copies in any other way than with staples, binder clips or paper clips.
- Mail application to: NC Civil War Tourism Council, Attn. Grants Committee, PO Box 844, Goldsboro, NC 27533

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