

Applying for a Grant from the Mankato Clinic Foundation

Grants are only considered through the application process. Applications should be submitted in writing to:

Marcia Bahr
Mankato Clinic Foundation
1230 E. Main St.
Mankato, MN 56001
(507) 389-8770
marciab@mankato-clinic.com

Grant Schedule

Applications will be reviewed by the Mankato Clinic Foundation on a quarterly basis and should be submitted following the schedule below:

Application Due Dates	Grant Disbursement Dates
March 1	April 15
June 1	July 15
September 1	October 15
December 1	January 15

Initiatives That will Receive Consideration

The mission of the Mankato Clinic Foundation is to **encourage and support the health and wellbeing of our community through initiatives that promote and improve community wellness**. With this mission in mind, the Mankato Clinic Foundation will consider funding initiatives that meet one or both of the following criteria and have a local impact within the Mankato Clinic service area (Note: The Mankato Clinic has eight sites in six communities, including Mankato, North Mankato, St. Peter, Lake Crystal, Mapleton and Blue Earth.).

Funding Criteria

- Is health related or directly improves the wellness and wellbeing of community members; and/or
- Supports education at any level with an emphasis on physical or mental wellness.

Application for Grant Funding

To apply for funds from the Mankato Clinic Foundation, please answer the following questions in the order and format provided.

Contact Information

1. At the top of your grant request please include the following:
 - a. Title of project
 - b. Organization name
 - c. Name, title and contact information of the person making this request (who can be contacted with follow-up questions)
 - d. Amount requested
 - e. Who the check should be made payable to

Organization Information

2. Provide a brief summary of your organization, including its mission and goals.
3. Have you received funding from the Mankato Clinic Foundation in the past? If so, when and for what purpose?

Purpose of Grant

4. Provide a brief narrative of your project or initiative, including the timeframe, the amount you are requesting from the Mankato Clinic Foundation, and total cost of the project.
5. Describe how your initiative meets the funding criteria listed above.
6. Name any community partners associated with your initiative (both financial and in-kind).
7. If your initiative receives funding, how will the Mankato Clinic Foundation be recognized?

Community Impact

8. What communities will be impacted by your initiative and how many community members will benefit from it? If your goal is to raise funds, what portion of the funds raised will remain in the community?
9. What are the anticipated outcomes of your initiative and how will those outcomes be measured?

Attachments

10. Attach a project budget. Also, please attach your annual organizational budget.
11. List the names of corporations and foundations that you are soliciting for funding. Include dollar amounts and the amounts already committed.
12. If you are an IRS 501(c)(3) not-for-profit organization, attach a copy of your 501(c)(3) determination letter. If you are using a fiscal agent, identify the fiscal agent here.