

SMALL GRANT APPLICATION

Introduction to Request

Thank you for your interest in applying for a grant from the Northland Foundation. The Grant Program provides financial and technical resources to tax-exempt nonprofits located in Aitkin, Carlton, Cook, Itasca, Koochiching, Lake, and St. Louis Counties in Minnesota. Support is directed toward specific Areas of Interest to help individuals, families, and communities throughout the region to grow and prosper.

At the Northland Foundation, we view our work with grantees and other partners as an opportunity to learn together. The letter of inquiry is the first step in this learning process, and we look forward to gaining a clearer understanding of your organization's activities and goals.

We have streamlined our application procedure to make it as user-friendly as possible, and request only the information that is most vital to our assessment of your request. Your [feedback](#) is welcome, to help us continue to improve our process. Thank you in advance for completing this application as clearly and fully as possible.

Getting Help

There are circled question marks next to some of the fields in the application. With your mouse, you can hover and click over these for additional information. If you have questions or need further assistance at any time, please contact Erik Torch, Director of Grantmaking or call our the Northland Foundation: 218-723-4040 or 1-800-433-4045.

PROPOSAL INFORMATION

Proposal Details

Proposal Title ECFE/ECSE Parent Support Group: Parent Talk

Total amount requested for this proposal \$ 800.00

As you answer these questions, please be as thorough as possible within the allowed amount of text. Lack of the necessary information may delay the approval of your application.

Provide a short summary of your request

We are requesting funding to provide child/sibling care, transportation, and supplies for our parent support group. This will be our third year and the group grows each year. We have various in-kind assistances from ISD 709 and ECFE but in an attempt to remove as many barriers for parents, we need assistance in providing the above things.

In detail, describe the need/opportunity that your proposal addresses

Parents in the Duluth and surrounding area have long expressed a need to for a parent support group that addresses the unique needs of parents with children who have special needs whether those needs are physical or emotional. Through our group, we have been able to fill this void and the group is growing every year! We work with parents on nutrition, behavior management, understanding the special education process/paperwork, how to access community

Describe the goals and key activities you will undertake to address this need/opportunity

programs and services, network with other parents, and simply talk about the unique challenges raising children with unique situations.

Each group provides a check in time for parents to discuss things going well and things that they are struggling with. This is followed by a topic of the month which were created based on feedback from parents. Topics will include PACER presentation, nutrition presentation, behavior management techniques, sibling rivalry, tantrums, routines and schedules, and community services.

Describe the anticipated impact of your proposed activities

Parents will feel that they have a safe space to talk about parenting in a supportive, nonjudgmental environment. Parents will learn different tools to help alleviate stress in the home, and parents will connect with other parents experiencing similar struggles.

How will you know you've been successful

Positive feedback from participants, an increase in the number of participants.

Proposed Project Start Date 10/14/2013

Proposed Project End Date 06/30/2015

Counties this Project will serve

BUDGET INFORMATION

Annual Operating Budget \$ 1,950.00

Proposed Project Budget \$ 1,950.00

ORGANIZATION INFORMATION

Your Organization information will automatically populate once you save your application for the first time. If the information below is not correct, FIRST Click on the Save button, then go to [your Organization Profile](#) and click on the Edit button. Make the necessary changes and 'Save'. Then click on the 'My Submissions' link to get back to the application area.

Legal Name of Organization ISD 709 and ECFE

Popular Name of Organization or Also Known As

Organization Address 2102 N Blackman Ave
Duluth, MN 55811

County where this Organization is physically located

Organization Main Phone Number 218-336-8700 x2959

Organization Web Address

Is your organization a 501(c)(3) or unit of government? Yes

Federal Tax ID Number (EIN) unsure

FISCAL AGENT INFORMATION (Leave blank if no Fiscal Agent is needed)

Fiscal Agent Legal Name

Fiscal Agent Federal Tax ID Number

Fiscal Agent Street Address

Fiscal Agent City

Fiscal Agent State

Fiscal Agent Zip

AUTHORIZATION SECTION

By submitting this application to the Northland Foundation, you confirm that your Organization's CEO, President, Executive Director, or School Principal has approved this submission.

Submission Approved

Contact Role

Contact Name	Organization Name	Role	Action
Debbie Youngblom	ISD 709 and ECFE	Payment Contact	
Vicki Thrasher-Cronin	ISD 709 and ECFE	Other	
Victoria Sundell	ISD 709 and ECFE	Reporting Contact	

List of Sources for Request

List committed sources and sources that have been applied for but not yet approved. Click on the "New" button to add a new source.

Once you've added a source, you may:

- Edit** - By Clicking the 'Pencil & Paper' icon
- View** - By Clicking the 'Magnifying Glass' icon
- Delete** - By Clicking the "X" icon

Source	Requested Amount	Date Request Was (or Will Be) Submitted	Amount Committed to Date	Date Committed or Anticipated Notification	Action
--------	------------------	---	--------------------------	--	--------

Attachments

- [1. Request - Small Grants Project Budget.xls](#)