



# America250 Mississippi — Program Grant and Minigrant Application

**Please note – This is a sample document to aid you in filling out your grant application. Applications can only be submitted via the online grant portals.**

- Program Grants deadlines are 9/15/2025, 11/15/2025, 1/15/2026, and 3/15/2026
- Minigrants are accepted on a rolling basis until Mini Grants funds are exhausted

## **Before continuing, please review and confirm the following requirements.**

You may not submit an application unless all requirements have been met.

- ☐ Applicant is an eligible organization. (See Guidelines)
- ☐ All program participants have been contacted and have agreed to participate.
- ☐ Proposed program or event will take place at least 4 weeks after the deadline for which you are applying.
- ☐ No honorarium has been requested for an employee of applicant organization.
- ☐ Fiscal Officer has agreed to be responsible for managing grant funds and project expenses for the duration of the grant period and preparing financial reports.
- ☐ Project Director and Fiscal Officer are not the same person.

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# Grant Type

Choose the Type of Grant you're applying for.

<input type="checkbox"/> Program Grant <ul style="list-style-type: none"><li>▪ up to \$10,000</li><li>▪ Applications accepted September 15, 2025; November 15, 2025; January 15, 2026; and March 15, 2026.</li></ul>	<input type="checkbox"/> Mini Grant <ul style="list-style-type: none"><li>• up to \$5,000</li><li>• Applications accepted on a rolling basis until minigrant funds are exhausted, but must be submitted at least four weeks prior to any programming.</li></ul>
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# Registration

Name of Individual Completing the Form\*

Individual's Title\*

Individual's Organization\*

Individual's Email\*

Individual's Phone\*

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# Applicant Organization

Applicant Organization\*

## Applicant Organization Type\*

- |   |   |
|---|---|
| <input type="checkbox"/> Archive                                | <input type="checkbox"/> Indigenous Tribal Organization or Community            |
| <input type="checkbox"/> Arts-related Organization              | <input type="checkbox"/> K-12 School or School System                           |
| <input type="checkbox"/> Community Organization or Center       | <input type="checkbox"/> Media Organization                                     |
| <input type="checkbox"/> Convention and Visitors Bureau         | <input type="checkbox"/> Membership Organization or Association                 |
| <input type="checkbox"/> Cultural Heritage Organization         | <input type="checkbox"/> Museum (History)                                       |
| <input type="checkbox"/> Festival                               | <input type="checkbox"/> Museum (Other)   |
| <input type="checkbox"/> Foundation                             | <input type="checkbox"/> Nature Center/Botanical Garden/Arboretum/Environmental |
| <input type="checkbox"/> Government State or Local              | <input type="checkbox"/> Private Business or Organization                       |
| <input type="checkbox"/> Higher Ed — 4 Year College             | <input type="checkbox"/> Public Library   |
| <input type="checkbox"/> Higher Ed — 2 Year College             | <input type="checkbox"/> Social Services or Health Organizations                |
| <input type="checkbox"/> Higher Ed Affiliates                   | <input type="checkbox"/> State or National Park                                 |
| <input type="checkbox"/> Historical Site or House               | <input type="checkbox"/> Other  |
| <input type="checkbox"/> Historical Society                     |   |
| <input type="checkbox"/> Incarceration or Detention Facility    |   |
| <input type="checkbox"/> Independent Research Library or Center |   |

Applicant Organization Address\*

Applicant Organization Phone\*

Applicant Organization Website

EIN (If applicable)

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# Project Director

The **Project Director** is the individual responsible for managing all aspects of a project, including its planning, promotion, conduct and evaluation.

Project Director Name\*

Project Director Title\*

Project Director Organization\*

Project Director Address same as Applicant Organization?\*

☐ Yes    ☐ No

Project Director Address\*

Project Director Email\*

Project Director Phone\*

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# Authorizing Official

The **Authorizing Official** is the person with the authority to legally obligate an organization to the grant agreement.

Authorizing Official Name\*

Authorizing Official Title\*

Authorizing Official Organization\*

Authorizing Official Address same as Applicant Organization?\*

☐ Yes

☐ No

Authorizing Official Address\*

Authorizing Official Email\*

Authorizing Official Phone\*

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# Fiscal Officer

The ***Fiscal Officer*** is the person who will manage fiscal matters related to the grant.

Fiscal Officer Name\*

Fiscal Officer Title\*

Fiscal Officer Organization\*

Fiscal Officer Address same as Applicant Organization?\*

☐ Yes

☐ No

Fiscal Officer Address\*

Fiscal Officer Email\*

Fiscal Officer Phone\*

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# Project Summary

Project Title*
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Proposed Start Date*	End Date*
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Projects must be completed by 12/31/2026

Summary of project in less than 10000 characters
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# Programs and Activities

**Project Activity Dates and Times.** Provide a brief summary of any planned programs, events or activities. If you know dates, times and/or locations please include them. If your proposal involves a project rather than a public program, please share key elements of your timeline for completing your project.

Expected Attendance

**Target Audience.** Who is the target audience? How will you reach them? Describe project publicity plans. (*Proposals that involve a project rather than a public program need not complete this section.*)

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# Planning Partners

**Planning Partners** are collaborators who help identify program or project ideas, who share your goals for your project and, if a public program or event is involved, help build a diverse and inclusive audience through their culturally-engaged networks.

**Planning Partner 1** *(Fill out the same information for any additional partner.)*

Partner 1\*

Partner 1 Organization\*

Partner 1 Role\*

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# Project Advisors

**Project Advisors** are individuals who bring technical expertise to your project. Project Advisors may also include humanities scholars with an advanced degree in a traditional liberal arts field who has taught, written or done research in that field, or someone who is otherwise well-qualified to bring subject-matter expertise to a project, such as a museum curator, tribal elder or individual who is an acknowledged cultural expert within their community.

**Project Advisor 1** *(Fill out the same information for any additional project advisors.)*

Advisor 1 Name

Advisor 1 Title

Advisor 1 Organization

Advisor 1 Address

Advisor 1 Email

Advisor 1 Phone

Will Advisor 1 be paid with Grant funds?

☐ Yes

☐ No

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# Project Budget

Grant Request	Cash Match	In-Kind Match	Total
Grantee Staff (Grant) \$	Grantee Staff (Cash Match) \$	Grantee Staff (In Kind Match) \$	Grantee Staff Total \$
Contractual (Grant) \$	Contractual (Cash Match) \$	Contractual (In Kind Match) \$	Contractual Total \$
Travel (Grant) \$	Travel (Cash Match) \$	Travel (In Kind Match) \$	Travel Total \$
Supplies (Grant) \$	Supplies (Cash Match) \$	Supplies (In Kind Match) \$	Supplies Total \$
Printing (Grant) \$	Printing (Cash Match) \$	Printing (In Kind Match) \$	Printing Total \$
Equip Rental (Grant) \$	Equip Rental (Cash Match) \$	Equip Rental (In Kind Match) \$	Equip Rental Total \$
Facilities Rental (Grant) \$	Facilities Rental (Cash Match) \$	Facilities Rental (In Kind Match) \$	Facilities Rental Total \$
Advertising (Grant) \$	Advertising (Cash Match) \$	Advertising (In Kind Match) \$	Advertising Total \$
Other Expenses (Grant) \$	Other Expenses (Cash Match) \$	Other Expenses (In Kind Match) \$	Other Expenses Total \$
Grant Total \$	Cash Match Total \$	In Kind Match Total \$	Project Total \$

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# Sign and Submit

Signed By\*

By signing you are declaring that you have been authorized to submit this application on behalf of the Applicant Organization.

Role\*

☐ Authorizing Official

☐ Project Director

☐ Fiscal Officer

☐ Other

Signature\*

On the online portal, you will use your mouse or finger to draw your signature above. By signing you are declaring that you have been authorized to submit this application on behalf of the Applicant Organization.

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**\* After you submit your completed application, a confirmation email will be sent to the Project Director and the Application Contact identified above. If a confirmation email isn't received within a few minutes, please contact the Mississippi Humanities Council at 601-432-6752.**

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