

Instructions

Thank you for your interest in this Sourcewell program. We want to make this process as easy and seamless as possible, so we have a few recommendations before you begin.

- Download a copy of the document and open it in Adobe Acrobat Reader. This is standard software on most machines; however, if you don't already have this installed on your computer, you can obtain it for free at https://get.adobe.com/reader/.
 - This is <u>very important</u> because if you don't use Adobe Reader, but instead complete the document using an internet browser (Internet Explorer, Firefox, Chrome, etc.), you won't be able to save your work, digitally sign the form, or submit electronically.
- Once you have opened the document in Acrobat Reader, immediately 'Save As' from the 'File' menu on the upper left-hand corner. Save often as you work through the document.
- Review your document to ensure everything has been completed. When ready, submit to the Sourcewell contact as indicated.

Please take your time and don't hesitate to reach out if you have questions or concerns. We look forward to working with you!



Community Boost Funds for Local Governments

2023-2024

Community Boost Funds are awarded on a first-come, first-served basis while funds exist and are intended to support small projects. A city, county, township, or other government unit as defined in Minn. Stat. § 471.59 Subd. 1(B) may apply for one Boost award up to \$1,000 per fiscal year, no match required. Entities are only eligible for either one Community Boost Funds award or one Community Match Funds¹ award per fiscal year.

Eligibility requirements

- The applicant organization must:
 - Be a Sourcewell participating agency. Register at sourcewell-mn.gov/register.
 - Be a city, county, township, or other government association located in Cass, Crow Wing, Morrison, Todd, or Wadena county.
 - Apply for no more than one Community Match Fund or Community Boost Fund award per entity per fiscal year (July 1-June 15); entities cannot apply for additional Community Match or Boost Funding until their previous project has been completed and the final report has been submitted.
- The proposed project must:
 - Relate to programs or services authorized under Sourcewell's enabling statute, Minnesota Statutes § 123A.21, subdivision 7, and serve a public purpose.
 - Be completed within one year of the Effective Date of applicant's Community Boost Funding Agreement with Sourcewell if funds are awarded.
 - For projects where equipment is delayed due to supply chain issues, funding must still be expended within one year. Funding may be applied toward down payments or partial payments, and a copy of the payment receipt along with the anticipated equipment delivery date must be included with the final report. Sourcewell will follow-up one week after the anticipated delivery date to ensure the project has been completed.
- The proposed project must **not** involve:
 - Payment for land acquisition or building purchases.
 - Costs for transportation infrastructure construction or maintenance (i.e., roads and/or bridges).
 - Expenses incurred prior to receipt of the award.
 - Loans or reimbursement to individuals or businesses.
- A Community Boost Fund application must:
 - Include all required information and attachments:
 - Counties must also include a signed resolution in support of the project from the county board.
 - Request no more than \$1,000.

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Funding process

Step 1: Sourcewell staff will review each application to ensure the criteria outlined above have been met. Applications that do not meet the criteria will not be eligible for Community Boost Funds.

Step 2: Entities that pass the initial review process will be awarded funds on a first-come, first-served basis while funds remain available.

Step 3: Sourcewell staff will notify award recipients and provide further instructions.

Contact information

Completed applications can be submitted by email to: community@sourcewell-mn.gov or by U.S. Mail to:

Sourcewell Community Solutions 202 12th Street NE P.O. Box 219 Staples, MN 56479 Sourcewell Page 3 of 5

Community Boost Funds Application

2023-2024

	Or	gan	ization	ı infori	mation
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2. Amount of Boost Funding requested:

and services as identified in question 5. (400 word maximum)

Entity name:			
Physical address:			
Mailing address:			
Project point of contact name:			
Email:	Telephone:		
Authorized signer of legal agreement name:			
Email:			
Project information			
Please provide the following information specific to the proposed project:			
1. Project title:			

3. How does the proposed project promote and align with Sourcewell's statutory purpose of providing programs

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	escribe how the project primarily benefits your communiting individuals, businesses, or nonprofit entities.	y wit	thin Region 5. Projects cannot primarily benefit
5. T	he proposed project must relate to Sourcewell's governm	ent p	ourpose as defined in Minn. Stat. § 123A.21,
S	subdivision 7. Please identify all program or service areas t	o wh	ich the proposed project will relate.
	administrative services	П	employee personnel services
	curriculum development		vocational rehabilitation
	data processing		health, diagnostic, and child development
	distance learning and other telecommunication	_	services and centers
	services	Ш	leadership or direction in early childhood and
	evaluation and research staff development	П	family education community services
	media and technology centers		shared time programs
			fiscal services and risk management programs,
	pupil personnel services		including health insurance programs providing
	planning		reinsurance or stop loss coverage
	secondary, postsecondary, community, adult,		technology planning, training, and support
	and adult vocational education teaching and learning services, including	П	services health and safety services
	services for students with special talents and		student academic challenges
	special needs		cooperative purchasing services
Bud	get information		
6. (Complete the table below to identify the source of funds for	or yo	ur project.
ı	Revenue Sources (not including in-kind)		

Ent	ity	Amount
1.	Sourcewell	\$
2.		
3.		
	Total	\$

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7. Complete the table below to explain, in detail, the itemized costs related to the project. Sourcewell staff may contact you for additional information regarding your budget if more detail is required.

Expenditures/ Direct Costs	Sourcewell Dollars	Other Sources
1.		
2.		
3.		
4.		
Total	\$	\$
	Total Project Budget	\$

Certification

I certify that the information contained in this application and in any related attachments is true and correct to the best of my knowledge and belief, and that I have the authority to apply for Community Boost Funds in the amount requested.

Finally, I certify that no funds awarded as a result of this application will be used to pay costs incurred prior to receipt of the award, or loans or reimbursement to individuals or businesses, payment for land acquisition or building purchases, costs for transportation infrastructure construction or maintenance.

Signature	
Printed Name	
Title	
Entity	-
Date	