# **2025 Film Community Grant Application**

Date:

Organization Name:

Primary Contact Name:

Primary Contact Title:

Address:

City, State, Zip:

Phone Number:

Email Address:

## **ORGANIZATION**

## Applicants must be 501(c)(3) nonprofit organizations and approval is conditioned upon the organization providing a copy of its exemption letter demonstrating the organization’s tax-exempt status

* Please attach the most recent statement of financial position

Annual budget:

Briefly (1-2 paragraphs) Tell us about your organization - key people, mission/vision statement:

Who is the primary beneficiary of the organization’s programming?:

Describe how your organization practices the principles of Diversity, Equity, Inclusion, and Access in pursuit of your mission:

## **PROJECT/ORGANIZATION PROGRAMMING** (this grant can be project-based or for general operating funding)

Describe your project/programming and how it will benefit the film/content production industry in Northern Minnesota:

Which of the goals will this project be working toward? (check all that apply)

* Attract outside investment or productions to the region.
* Utilize local resources and/or talent.
* Create jobs
* Creative Programming for the community benefit and exposure

Describe how this grant funding will be used to achieve the goals listed above:

**MEASUREMENTS OF SUCCESS:**

Describe at least three metrics that you will use to gauge the project’s success:

## **FUNDING**

Amount requested:

How will the requested funding affect the organization or project's scope or outcomes?

**CERTIFICATION:**

In submitting this application, the applicant agrees that if granted, the organization will spend funds solely for the purposes stated in the application and will refund the unexpended portion of such funds to the Upper Midwest Film Office, if any. The applicant/program/project will not discriminate as to race, age, religion, sex, national origin, or any other protected class.

By submitting this application, I certify and agree that I am the owner or the authorized representative of the organization and that I have the authority to bind the applying organization to all matters contained herein. I further certify and agree that all information submitted is true and correct to the best of my knowledge. I agree that false or misleading statements may result in disqualification of the organization’s application and, at the discretion of the Upper Midwest Film Office, will require the immediate return of any disbursed funds. Failure to provide proper documentation of the information provided in this application upon request shall render the application incomplete and will result in the application being disqualified and require that all funds disbursed to the organization be returned immediately to Upper Midwest Film Office. Application for funds does not guarantee receipt of funding. All funding decisions are final and non-negotiable.

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Authorized Signature

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Print Name

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Title